

Aging Issues

A publication for New Hampshire's older citizens

Volume 7 Issue 1

Spring 2003

May 22nd Conference on Aging Will Highlight Caregiver Supports

The next *New Hampshire Conference on Aging - Building Tomorrow Today* - will be held on May 22, 2003 at the Courtyard Marriott in Concord.

The conference is being sponsored by the Division of Elderly and Adult Services in conjunction with the State Committee on Aging. This year's theme will be **Family and Friends, A Circle of Support**. Consumers, families and caregivers for elders are especially encouraged to attend, since the conference will highlight caregiver resources and aging supports.

Speakers will include DHHS Commissioner Nicholas Vailas and DEAS Director Catherine Keane. National and state legislative and policy trends will be addressed that are of concern to New Hampshire's older citizens. Other speakers will include Mike Magee, MD, international speaker on consumer empowerment, aging and caregiving issues and Dr. Ruth Jacobs, teacher and author of the popular *Be An Outrageous Older Woman* and other books on aging. The conference will also feature a number of workshops and more than 30 exhibits.

More information will be available in March. A discount on the conference registration fee will be offered to persons age 65 and older. Questions on registration and/or reserving exhibit space may be directed to Sharon Kramer-Gabay at the Community Health Institute in Concord, Telephone: 573-3300 or 573-3306.

Project Good Morning Saves Lives

by Margaret Morrill

One morning last fall, the telephone rang in the apartment of 88-year old Lorena, a resident of Rochester. The caller was Sally Leach, a volunteer with Project Good Morning, a free telephone check-in program operated by the Rochester Police Department for area seniors who live alone. When Lorena answered, she told Leach that she was having trouble breathing.

Leach immediately called the Rochester Police Department, which dispatched an ambulance. After receiving medical treatment at Frisbie Memorial Hospital, Lorena recovered.

Approximately 40 older persons participate in Project Good Morning, which was initiated in 1995 by RPD

Communications Specialist Eileen Douglass after she read about a similar program then operating in North Conway. In order to get the project started in Rochester, Douglass visited senior housing complexes, churches, and other community organizations.

Any older person in Rochester who lives alone can enroll in Project Good Morning by contacting the RPD and completing a form that contains basic identifying and key medical information. Persons who enroll agree to talk with a volunteer between 8 and 10am daily to confirm that they are all right. If a person does not respond or if the volunteer finds that the person needs help, the RPD is alerted.

Sally Leach has 10 people on her daily call list. A few days after the incident with Lorena, 93-year old Edith failed to answer her phone. Leach called Eileen Douglass, who contacted the housing manager at Edith's apartment complex. The housing manager went to Edith's apartment and found that she needed help. Edith was taken to Frisbie Memorial Hospital for treatment and later went to Rochester Manor for further recuperation.

Last November, the RPD presented Sally Leach with a Guardian

Vailas Appointed Commissioner of DHHS

Nicholas Vailas, founder and CEO of the Bedford Ambulatory Surgical Center, has been appointed to be Commissioner of the NH Department of Health and Human Services. DHHS administers more than 140 critical programs and services for children and adults statewide.

Nominated by Governor Craig Benson, Vailas' appointment was confirmed by the Executive Council on January 24th. Vailas replaces former DHHS Commissioner Donald Shumway, who left the Department last July to become president and chief executive officer of the Crotched Mountain Foundation in Greenfield, NH.

Up until Vailas was appointed, Kathleen Sgambati, Deputy Commissioner of DHHS, served as Acting Commissioner following Shumway's departure.

Vailas grew up in Manchester and is a former health education teacher and coach in the Manchester school system. He completed his undergraduate studies at Plymouth State College and earned his Masters Degree from the University of Michigan.

Dedicated for many years to improving the quality of health care in New Hampshire, Vailas founded the Bedford Ambulatory Surgical Center, where he has functioned as the CEO since 1992. He is also the owner of the Fitness Network in Manchester, which he founded in 1984.

Vailas has been a member of the state's Certificate of Need Board, which oversees plans for the building and expansion of major medical facilities and has also served as a board member of the Musculoskeletal Institute from 1994 to the present. In addition, he is a member of the City of Manchester Safety Review Board, the State of NH Worker's Compensation Rulemaking Committee, and participates as a panel member for the State of NH Workers Compensation Peer Review Committee.

Vailas lives in Bedford and is a loving husband and father of a daughter and four sons. One of his interests in his spare time is the buffalo farm he owns in Errol, NH.



Angel pin in recognition of her prompt action in saving two lives. However, Leach is modest about her achievements, and is quick to point out that when she talks with Project Good Morning participants, she also enjoys sharing everyday news, recipes and jokes, and reminiscing about life in Rochester.

"I talk to them, I laugh with them, I sing with them," says Leach. "I love what I do."

Billie Griner, another Project Good Morning volunteer, concurs. A retired nurse who moved to Rochester from Colorado ten years ago, she has found this type of volunteer work very rewarding.

"If they need me, I'm here, seven days a week, 365 days a year," says Griner, referring to the people she calls daily. "Talking with them brightens up my day too."

Both Leach and Griner are enthusiastic about Project Good Morning and about Eileen Douglass' kindness to participants and volunteers alike. Douglass herself says, "They're like family. We enjoy talking to them as much as they enjoy talking to us."

Last year, Project Good Morning participants and volunteers had a

chance to meet for the first time at a picnic organized by the RPD and the Strafford County Homemakers, and more friendships have blossomed since then.

There are virtually no costs associated with Project Good Morning,

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Eileen Douglass (RPD) presents a guardian angel pin to Project Good Morning Volunteer Sally Leach, whose prompt action saved two lives.

Photo: The Rochester Times.

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Protection Program Helps Adult Abuse Victims

by Margaret Morrill

They are beaten, yelled at, unreasonably confined, sexually abused or financially exploited.

They are the victims of adult abuse.

Victims of adult abuse are often in frail health, and unable to protect themselves or care for their own needs. Many states have enacted legislation to protect adults in this situation. In 1978 New Hampshire enacted the Adult Protection Law (RSA 161-F: 42-57), one of the first of its kind in the nation. The Division of Elderly and Adult Services administers the Adult Protection Program, which is based on this law.

Types of abuse

According to New Hampshire's Adult Protection Law, abuse includes several forms of mistreatment, i.e.:

Physical (hitting or other methods of physical force);

Emotional (verbal harassment, intimidation or unreasonable confinement);

Sexual (any form of sexual contact that takes place without an incapacitated adult's informed consent)

Neglect (depriving an incapacitated adult of adequate food, clothing, shelter or medical care)

Exploitation (unlawfully obtaining or using income, resources or other property)

Self-Neglect. (an incapacitated adult's inability to maintain his/her own health and safety, which may result in poor nutrition, lack of attention to personal hygiene, inability to handle finances or other activities of daily living, and/or living in a home that is animal-infested or contains other hazards).

Where the victims live

Adult victims of abuse may be living in their own homes, with rela-

tives or friends, in nursing homes or other residential care facilities or in specialized group homes. Some victims have no fixed address. A perpetrator of abuse and neglect may be any person, including a spouse, an adult child or another relative, or a paid caregiver.

What the law says

New Hampshire's Adult Protection Law covers any individual age 18 or older who is or is suspected of being incapacitated (according to the law, adults are considered incapacitated when their physical, mental or emotional ability renders them unable to manage personal, home or financial affairs in their own best interests, or when they are unable to delegate responsibility to a responsible caretaker or caregiver.)

The Adult Protection Law requires that anyone suspecting or believing in good faith that an adult who is or who is suspected of being incapacitated, is being abused, neglected, exploited or self-neglecting, to report this to the Department of Health and Human Services, Division of Elderly and Adult Services (DEAS). When a report is received, DEAS is responsible for investigating, determining whether the report is founded (substantiated), and, when necessary, for offering services to protect the adult.

Persons making reports in good faith are immune from civil or criminal liability (*information on how to report appears at the end of this article*).

The role of DEAS

The number of reports received by DEAS has grown from 239 in 1980 to 1964 in 2002. It is likely that the number of reports will increase as the aging population continues to grow.

When DEAS receives a protective report, it is assigned to a social worker from one of the DEAS District Offices or to a staff member from the DEAS Central Office for investigation. The investigation is completed in accordance with the Adult Protection Law and rules adopted under New Hampshire's Administrative Procedures Act.

The DEAS staff member meets and talks with the alleged victim, the alleged perpetrator (if one is named) and any other persons who can provide information. The staff member may also need to review medical records, photographs, correspondence and/or other relevant documents. After reviewing all the facts, the DEAS staff member determines whether the report is founded (substantiated) or unfounded.

Investigations conducted under the Adult Protection Law are civil, not criminal investigations, and stress providing a remedy, rather than prosecution. However, the law does require DEAS to report to the Department of Justice, local law enforcement or the county attorney any situations involving serious bodily injury, or situations where there is reason to believe that a crime has been committed.

If the report is founded, DEAS offers protective services to the victim. These may include, but not be limited to, in-home services that help maintain health and independence (such as homemaker or home-delivered meals), respite care to relieve an overburdened caregiver and/or counseling to help the victim through a difficult and stressful period.

Lynn Koontz, an administrator at the DEAS Bureau of Community Services, said that although DEAS

offers protective services, the victim may choose to decline them.

"The Adult Protection Law tells us that an adult's right to self-determination should be preserved, and DEAS respects that right. This means that an adult has the right to make choices, even though they are choices that others may not approve of, and may not see as being in the adult's best interests. It is only when a Probate Court finds that he or she is legally incapacitated [unable to make informed decisions] that the adult's right to make choices is in question."

Strengthening state laws

During the 2002 legislative session, a law was passed which established criminal penalties for the neglect of elderly or disabled adults who have suffered serious bodily injuries. This new criminal law is viewed as a means (not previously available) by which to prosecute individuals who have caused harm to vulnerable adults.

The Adult Protection Law was also amended to add stronger language about the immunity from liability for persons who make protective reports in good faith and provide information related to such reports. Other amendments strengthened the ability of DEAS to obtain records and documents needed to complete protective investigations.

What you can do

Protecting vulnerable adults is the business of DEAS, but reporting situations as required by the Adult Protection Law is the business of all New Hampshire citizens and is mandatory under the law. Your participation is vital to our efforts, since we

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Comparing Housing Options? Standard Disclosure Form Can Help

Effective January 1, 2003, residents and prospective residents of assisted living and other housing for older persons can expect to receive The Standard Disclosure Summary Form. This form contains specific and detailed information about the services included in the housing provider's base rate and the costs of those services.

The NH Department of Health and Human Services created the

form in response to HB 1220, which was passed by the legislature in May 2002. This law directed the Department to establish standards relating to the uniform disclosure of information to consumers who reside or who wish to reside in assisted living or other housing for older persons as defined in HB 1220. As required by the Administrative Procedures Act, the Department adopted a rule on

this requirement, which became effective on January 1, 2003.

The goal of this legislation is to help consumers make informed decisions when evaluating and comparing housing options. By receiving all of the necessary financial and service information ahead of time, consumers can be in a better position to assess whether a particular housing provider can meet their needs, both in the short term and in the future.

Help With Utility Bills

Fuel Assistance

If you or someone you know has had trouble paying fuel bills this winter, applications are still being taken for the Fuel Assistance Program administered by the Governor's Office of Energy & Community Services. Assistance is provided to eligible individuals as federal funds become available. Households where elders, persons with disabilities and/or young children reside receive priority. For more information, contact the local Community Action agency

listed in the Community Services section of your telephone directory.

The Electric Assistance Program

The Electric Assistance Program (EAP) provides income-eligible customers with discounts on their electric bills. Eligibility and the level of discount depend on the customer's utility, level of income, and whether the home uses electric heat. The discounts are intended to bring the customer's annual electric bill to approximately 4% of annual income (6% for customers with electric heat).

The Electric Assistance Program was developed by the Public Utilities Commission to respond to the Legislature's call for low-income programs as part of electric restructuring. The program is operated statewide by all of the state's electric distribution companies.

To apply for the Electric Assistance Program, contact your local Community Action Agency. They will let you know what income documentation you will need to bring. In addition, you will need a copy of your most recent electric bill.

Aging Issues

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Proposed Legislation Highlights Senior Issues

New Hampshire's older citizens will want to keep an eye on legislation being proposed during the 2003 session, since many bills focus on important areas of concern, including, but not limited to, adult protection, consumer safeguards, long term care, prescription drugs, housing, and property taxes. Some of this legislation is summarized below (information was current as of *Aging Issues* press time). The complete text of these and other bills can be found on the state government web site at www.gencourt.state.nh.us

Prescription Drugs

HB 425 would create a task force to study prescription drug costs. The task force would analyze the effectiveness of a range of options or solutions to enable citizens to purchase the necessary prescription drugs at the lowest possible price, and to ensure access to such prescription drugs.

HB 760-FN-A would establish the New Hampshire Healthy Families trust fund. The bill would generate new revenue through a tobacco tax increase that would support several health care initiatives, including a prescription drug program for seniors and people who have been determined to be disabled by the Social Security Administration. The program would serve individuals whose gross household income is not more than 200% of the federal poverty level.

SB 96-FN would create a prescription drug assistance program for NH seniors and individuals with disabilities. Eligible persons would include those who have an income below 200 percent of the federal poverty level, who are 65 years of age or older, and those age 18 or older who have been determined to be disabled by the Social Security Administration. The NH Department of Health and Human Services would administer the program, and would be required to apply for a waiver from the federal government in order to obtain federal matching funds.

Long Term Care

HB 712-FN, filed at the request of The NH Elder Rights Coalition, is intended to improve the quality of long term care services by providing greater accountability, better data, and more efficient operation. Among other things, the bill would require the Department of Health and Human Services to publish an annual report on the availability of, need for, and quality of long term care services in each county of the state, and to ensure timely access to less expensive community services for patients in hospitals and nursing facilities. The NH Department of Insurance would also be required to create an annual consumer guide regarding long-term care in New Hampshire.

HB 784-FN-LOCAL is intended to provide greater consumer choice with regard to long term care options under Medicaid. The bill would:

- Allow seniors and adults with disabilities to choose less expensive community services as an alternative to more expensive nursing home care under Medicaid, as long as the cost of community care is less than or equal to the nursing home cost;
- Eliminate the cost caps currently required under Senate Bill 409 (SB 409 states that the cost of community care under Medicaid cannot exceed 33% of the cost of nursing home care, and the cost of midlevel care cannot exceed 50% of the cost of nursing home care.)
- Require full funding of the NH ServiceLink Network, which provides information and assistance to consumers.

Abuse, Neglect, Exploitation

HB 291-FN creates the possibility of enhanced penalties (longer sentences) in cases of assault, sexual assault, and related offenses if the victim is 65 years of age or older.

HB 461 would establish a commission to study financial exploitation of the elderly and persons with disabilities. Among other things, the commission would promote greater public awareness of financial exploitation and scams against the elderly and identify legal and ethical issues involving people with diminished capacity. The commission would also study the role of the probate courts, including guardianship, alternatives to guardianship and issues of self-determination

HB 798 would amend the laws governing durable powers of attorney and guardianships to provide greater Probate Court oversight and control over the practice of agents or guardians making gifts out of the ward's or principal's funds that would leave him or her without sufficient funds to provide for his/her own care. Through such "gifts" the assets of incompetent adults are sometimes transferred to others (often the agents or guardians) to artificially impoverish the incompetent adults and render them eligible for Medicaid. Gifts of this nature are a concern to the Department of Health and Human Services because they raise questions of financial exploitation and result in increased costs to the State.

Vaughan Award Nominations Sought

The NH State Committee On Aging (SCOA) is seeking nominations for this year's Joseph D. Vaughan Awards, to be presented later this year. The Vaughan Awards are presented annually to one senior (or one couple) from each county who is/are age 60 or older, and who has shown outstanding leadership or demonstrated meritorious achieve-

ment as a volunteer on behalf of New Hampshire's older citizens.

Nominations for the Vaughan Awards are being accepted until **March 31, 2003**. To obtain a nomination form, call Peggy or Karen at **1-800-351-1888** or write to the State Committee On Aging, c/o Darwin Farber, 129 Pleasant St., Brown Bldg., Concord, NH 03301-3857.

Consumer Safeguards

SB 98-FN would require the Consumer Protection Bureau to establish and maintain a statewide do-not-call list to limit telephone solicitation, and commercial telephone sellers would also need to make certain disclosures to customers. The bill would also require the Public Utilities Commission to ensure that telecommunications companies notify customers of the requirements of the law.

HB 342 would restrict the use and display of Social Security numbers. This bill would end practices such as putting peoples' Social Security numbers on insurance cards and help address the growing threat of identity theft and other financial crimes and scams.

Housing

SB 34 contains several provisions that would protect the rights of older persons seeking retirement housing or alternatives to nursing home care. It implements the recommendations of the HB 320 Study Committee. Among other things, SB 34 would provide a clear definition of an independent living retirement community and require the community to disclose the services it provides, as well as the costs, and to register with the Office of the Attorney General, Consumer Protection Bureau.

SB 94-FN would require criminal background checks for employees working in long term care facilities and in home health care and for applicants with a license from the Board of Nursing.

Property Taxes

SB 45 would increase property tax exemptions and credits for the elderly, veterans, and persons with disabilities, and would allow municipalities to adopt an optional date for filing exemptions.

HB 618-FN would establish a property tax cap for persons over 65 years of age.

From The DEAS Director's Desk

Dear Reader:

The Division of Elderly and Adult Services continues to focus on the financing of long term care after Senate Bill 409's "sunset" provisions become effective on June 30, 2003, and on the future of the NH ServiceLink Network.

Senate Bill 409 (now RSA 151-E) was passed by the legislature in 1998 and sought to rebalance New Hampshire's long term care system away from institutional care, and toward home and community-based care. Among other things, SB 409:

- Initiated Medicaid coverage of midlevel care, including, but not limited to, assisted living and residential care;
- Mandated a statewide network of focal points (now known as The NH ServiceLink Network) to provide information and assistance on long term care.
- Changed the financing of long term care.

SB 409 established the NH ServiceLink Network, which to date has responded to 24,000 inquiries across the state for information and assistance, and has reached 8,000 consumers through public education. Through NH ServiceLink, the elderly, chronically ill adults, their families and caregivers have been able to connect with the resources they need to live independently and with the dignity that each of us would want for ourselves or a family member.

Whether these and other critical community supports continue to be available depends on what the legislature decides about the future funding of long term supports. Some other issues that need to be addressed include the shortage of direct care staff, which affects the ability of people to receive services, and low reimbursement rates for service providers. This makes it difficult for nursing homes, residential care facilities, home health agencies, adult day programs and other providers to meet their costs, which in turn affects the availability and quality of services.

The HB 1182 Study Committee, a joint legislative study committee charged with studying the impact of SB 409, supports SB 409, but indicated that future funding should address these issues. *(for further details, please see the article published in the Winter 2003 edition of Aging Issues).*

DEAS is also developing its next State Plan on Aging, which describes the services available to older persons and adults with disabilities under the Older Americans Act, the Social Services Block Grant Act, Medicaid, State programs and other programs. (The current plan, which became effective on October 1, 2000, expires on September 30th, 2003). A draft of the next State Plan will be available for review later this spring, and there will also be opportunities for public comment.

I also invite you to attend the 2003 Conference on Aging, which will be held on May 22 at the Courtyard Marriott in Concord. The conference will highlight resources and supports for family caregivers. A separate announcement appears in this edition of *Aging Issues*.

For information on these and other topics, please contact your local Area Committee on Aging.

With all best wishes,

Catherine A. Keane

Low Vision Aids At DHHS Offices

Persons with low vision may access the following assistive devices at Department of Health and Human Services District Offices:

Closed Circuit Televisions (CCTVs) are now available in three Department of Health and Human Services (DHHS) District Offices (Laconia, Manchester and Portsmouth).

CCTVs are Electronic Video Magnifiers and are used by individuals who have low vision. They magnify printed materials up to 65 times, and will enhance a person's ability to read forms or other printed materials. The 20" monitors sit above a stand where the printed material is placed. The unit has a hands-free auto focus capability for crisp, clear images. A person may choose to read white

print on black background or black print on white background, depending on what meets their needs.

Hand Magnifiers. If a CCTV is not available at the District Office you go to, you can ask for a hand magnifier which enlarges printed materials up to four times.

Large Print Application Forms. Persons completing Form 3000 (a form completed by individuals applying for certain DEAS social services) can now ask for the large print version of this form. Copies are available at all 12 District Offices and have been printed on off-white paper to enhance readability.

For more information on these and other assistive devices, contact Joan Marcoux at **1-800-351-1888, Ext. 8352**.

Aging and Assistive Technology

by Therese Willkomm

The term "assistive technology" was coined in 1988 as part of the *Technology Related Assistance for People with Disabilities Act of 1988*. Assistive technology includes devices, equipment, items, strategies or services that are used to increase, maintain, or improve an individual's functional capabilities in all areas of life.

Disability is a natural part of one's life experience. Eventually every person experiences some limitations related to vision, hearing, mobility, memory, lifting, walking, breathing, thinking, grasping, and a multitude of other physical, sensory, communication or cognitive impairments. The purpose of assistive technology is to maximize a person's abilities in all life functions and to prevent potential secondary injuries or illnesses.

The following are a few examples of how assistive technology can maximize health, safety, and independence in the home and in the community.

Many slips and falls can be easily prevented using assistive technology solutions such as rug gripper tape, Slip Stop, Stabil-icers for shoes and boots, various grab bars, removal of trip hazards, gripper tips for canes, and an assortment of mobility aids.

Simple assistive technology solutions for persons affected by memory impairment include: auditory pillbox reminders, voice organizers, motion sensor reminders, and automatic shutoffs for appliances. Various gripping and one-handed aids are excellent solutions for individuals who have arthritis or have suffered a stroke. These aids make it easy to pick up or manipulate objects around the home.

Electronic aids for daily living make it possible for individuals to control virtually any electrical or electronic item in the home including lights, the TV set, fan, door opener, telephone, etc using simple remote controls. Other assistive technology

solutions that might be considered are: proper seating and positioning equipment to prevent potential pressure ulcers, back-saving solutions for individuals and caregivers, powered scooters, lift chairs and recreational aids.

New Hampshire has a variety of funding sources for assistive technology and home modifications, including the Assistive Technology Loan fund available through the Bank of New Hampshire; Granite State Independent Living (supporting individuals with mobility impairments to maintain independence in the home); the New Hampshire Finance Authority; and various Medicaid programs. Relay New Hampshire provides equipment, training and assistance to enable individuals who are deaf or hard of hearing to use the telephone.

Unfortunately, not all insurances will cover all assistive technology solutions; therefore it is important to explore all available options.

ATECH Services offers a variety of assistive technology services for older persons, including assistive technology evaluation and consultation to promote increased independence in the home and to prevent potential secondary injuries. Please contact Lorraine Halton, ATECH'S referral coordinator, at **528-3060** to schedule an assistive technology services evaluation.

Other services offered by ATECH include:

- Hands-on assistive technology exploration and training from ATECH's Mobile Outreach Unit. This unit travels throughout New Hampshire. To schedule an Assistive Technology Exploration Day at your organization, contact Therese Willkomm at **226-2900**.

- The Refurbished Equipment Market Place, which provides refurbished wheelchairs, ramps, and durable medical equipment at tremendous savings. Call Paul Luff at **224-7630** for information about equipment availability.

The Law and You

The following question and answer is provided courtesy of Judith Jones, Director of the Senior Citizens Law Project for New Hampshire Legal Assistance.

Q I was recently denied home care benefits by Medicare. I got a notice from the home care provider stating that I did not meet the definition of homebound. What does homebound mean and can I appeal this decision?

A Senior citizens most often prefer to receive health care services in their home rather than in institutions. Unfortunately, despite consumer preference and the cost-effectiveness of providing health care services at home, state and federal programs remain biased towards institutional care. Medicare home care is one benefit that can help certain individuals get the care they need in their home.

Medicare home care benefits, unlike Medicare services at a skilled nursing facility, are not limited to a certain number of days of payment. A beneficiary continues to get services as long as he or she meets the eligibility requirement. A Medicare beneficiary is eligible for home health services if the following criteria are met:

1. The physician has signed or will sign a care plan;
2. The recipient is "homebound";
3. The recipient will need speech or physical therapy **or** intermittent skilled nursing; **and**
4. The home care provider is certified by Medicare.

Many people are wrongfully denied Medicare home care benefits because the term "homebound" is defined too strictly by the home care provider or the Medicare intermediary. The federal agency that oversees Medicare, "the Center for Medicare and Medicaid Services" or CMS, issued a statement in July 2002 to help clarify the meaning of homebound. An individual is considered to be homebound if that person has a condition such that leaving home requires a considerable and taxing effort and absences of the individual from the home are infrequent or of relatively short duration. An individual does not have to be bedridden to be considered homebound.

Other unnecessary Medicare home care denials occur because the individual's condition is determined to be "chronic" or "stable." Some home health agencies have been led to believe that Medicare will not continue to provide services to an individual whose condition is stable or unlikely to improve. Yet individuals who are confined to their home and need intermittent nursing care or physical or speech therapy are eligible for Medicare coverage even if they are chronically ill and the care is needed over an extended period of time.

You should receive a written notice from the home health agency prior to any denial, reduction or termination of Medicare benefits. Any beneficiary who is given this information verbally should object in writing and request a written notice, which includes the date and reason for the denial, reduction or termination.

After you get the notice you may want to consult with your physician. If your physician believes that home care services are still necessary, ask the physician to write to the home health agency documenting your medical condition and your need for continued services. The physician can be the beneficiary's most important advocate.

If this step does not restore benefits, you should send a letter to the home health care provider. The letter should include your name, address, health insurance number, the dates and types of services being denied and a request that the provider send a "demand billing" (sometimes referred to as "nonpayment billing") to the Medicare fiscal intermediary.

The provider's demand billing will generate an initial determination by the Medicare intermediary. This initial determination by the Medicare intermediary is the first step of the appeal process. You must be getting services from the provider in order for the Medicare intermediary to provide an initial determination. Unlike Medicaid recipients, Medicare beneficiaries do not have a right to benefits pending an appeal so you must have some way of paying for the services pending this determination.

If the initial determination is not favorable, you can request reconsideration. If the reconsideration decision is unfavorable, you can request a Social Security administrative hearing as long as the amount in controversy is greater than \$100.

New Hampshire Legal Assistance operates the Senior Advice Line, which is free and available to any NH resident who is age 60 or older. You may call the Advice Line Monday through Friday, 9am-4pm to speak with an attorney. Toll-free number: 1-888-353-9944. In Manchester, call 624-6000. TTY: 1-800-634-8989.

You can also check out all the services ATECH has to offer by visiting our web site at www.nhassistivetechology.org.

Therese Willkomm is the Executive Director of ATECH Services and Co-Director of the NH Technology Partnership Project.

National Commission Seeks To Improve Mental Health Services

by Bernie Seifert

How to improve mental health services for older adults is one of the key questions being considered by The New Freedom Commission on Mental Health, a 22-member commission appointed by President Bush in April 2002.

The purpose of the Commission is to conduct a comprehensive study of the United States mental health system, including both private and public sector providers. The Commission’s goal is to recommend improvements to enable adults with serious mental illnesses and children with serious emotional disturbances to live, work, learn and participate fully in their communities.

Dr. Stephen Bartels, a geriatric psychiatrist who is Medical Director of the NH Division of Behavioral Health and Associate Professor of Psychiatry at the NH Dartmouth Psychiatric Research Center, Dartmouth Medical School, has been asked to serve as an expert consultant to The New Freedom Commission.

In October 2002, Dr. Bartels presented information to the Commission’s Subcommittee on Mental Health and Aging, indicating that even though effective treatment exists, the mental health needs of many older adults are unmet. Commenting on this, Dr. Bartels said, “There is consensus on the part of the Commission on Mental Health that the needs of older adults are often neglected. Changes in the system of care are needed to address what is a rapidly increasing number of older Americans in need of mental health services.”

Depression, anxiety disorders and dementia are among the mental health problems frequently experienced by older persons. Alcohol abuse, medication misuse and psychotic disorders are also quite common.

Some of the barriers faced by older persons in need of mental health treatment include: cost of services, lack of coordinated mental and physical

health care, the stigma that older people may experience due to mental illness, the limited availability of specialized services (especially in rural areas of the country), and the lack of prevention and early intervention programs to address mental illness in older adults.

These concerns are even more significant when you consider that the percentage of Americans age 65 and older is expected to increase from 13% today to 20% in the year 2030. In addition, studies show that the number of older adults with major psychiatric illnesses is expected to more than double over the next 30 years, from 7,000,000 to 15,000,000.

The work of the New Freedom Commission, and in particular, the Subcommittee on Mental Health and Aging, will be critical when it comes to addressing the progressively increasing needs of older persons with mental illness and their caregivers.

To learn more about The President’s New Freedom Commission on Mental Health, or about mental health needs and services for older adults, you can log on to the following web sites:

www.MentalHealthCommission.gov. (*The President’s Commission on Mental Health*)

www.surgeongeneral.gov/library/mentalhealth (*Mental Health: A Report of the Surgeon General, Chapter 5: Older Adults and Mental Health*)

www.aoa.gov/mh (*Older Adults and Mental Health: Issues and Opportunities*)

Bernie Seifert is the Consultant to the Older Adult Services Unit at the NH Division of Behavioral Health (DBH). DBH is the state agency that coordinates behavioral and mental health services and provides some funding to the regional community mental health centers.

With A Little Help

Information from the Long Term Supports Committee of the State Committee on Aging

Residential Care In New Hampshire

by Dennis R. Hett

In the Winter 2003 edition of Aging Issues, you read about the whole spectrum of senior living options. Residential care is an important option, so the Long Term Support Committee has asked me to give you additional information:

Residential care is a form of assisted living that the State of New Hampshire licenses and regulates. Residential care facilities (RCFs) provide “home-like living arrangements” for older people or those with disabilities.

RCFs offer room and board, plus one or more of the following services: supervision, medical monitoring, assistance in daily living, protective care or supervision of medications. Some may offer medical or nursing supervision and medical care or treatment.

Each RCF in the State offers a slightly different “mix” of services. Several attend to persons with memory disorders, such as Alzheimer’s Disease. Some serve only individuals who can care for themselves. Others admit residents who have been determined eligible for nursing facility services under a Medicaid program called Home and Community Based Care for the Elderly and Chronically Ill (HCBC-ECI).

Residential care is generally less expensive than nursing home care (the nursing home provides many more services). You can “stretch” your senior living dollar in an RCF.

Most people pay for residential care out of their own resources. Medicare does not pay for residential care; neither does Medicaid (except under the HCBC-ECI program referred to above). Some long term care insurance policies pay for assisted living if this is licensed by a state.

Questions you may ask when evaluating an RCF

- Does it have a license from the State of New Hampshire?
- Does the RCF meet my current needs and can it continue to meet my needs if I require additional care in the future?
- Is it connected to the community?
- Does the RCF have a good reputation?

Organizations you may want to contact

- NH Association of Residential Care Homes, PO Box 484, Concord, NH 03302-0484 **(603-228-1231)**
- Northern New England Association of Homes and Services for the Aging, 540 Lafayette Road, Hampton, NH 03842 **(603-936-7596)**, www.nneahsa.com
- NH Health Care Association, 125 Airport Rd., Concord, NH 03301, **(603-226-4900)**, www.nnhca.org

Dennis Hett served a total of 25 years as CEO of three organizations representing not-for-profit homes and services for the aging in Massachusetts, New Jersey and the northern New England states. Dennis is co-chair of the Manchester Regional Area Committee on Aging and a member of the Long Term Supports Committee of the State Committee on Aging.

Preventing Falls

by Rhonda Siegel

While it’s true the risk of falling increases as you age, there ARE ways you can reduce your risk of falling and remain independent. For instance:

- Did you know that if you take four or more medications each day, including over the counter drugs, vitamins and herbs, you are at higher risk of falling? It’s important to have a complete list of your medications on hand. Review this list with your health care provider or pharmacist at least once a year. Discuss how your balance can be affected from the side effects or interactions between the medications you are taking and whether you should make any changes.
- If you are unsteady on your feet, contact your health care provider. Regular exercise with balance and strength training can help you to reduce your risk of falling and continue to lead an active life. Using assistive devices such as a cane or a walker can also be helpful.
- Wear safe footwear with non-slip soles that are appropriate for the weather and take proper precautions, such as wearing boots that have flat heels and good traction.
- Fifty percent of all falls happen at home. Look through your home to

identify possible hazards. The cost of a fall is much greater than the cost of making any changes. If necessary, install grab bars and handrails throughout your home. Increase lighting in areas that are too dim.

- Vision changes as you age. Be aware of this and allow time for your eyes to adjust to lighting and distance changes.
- Always make a point of stopping one thing before you start another. Divided attention is risky when you are moving.
- Watch for additional tips coming up in future issues.

The New Hampshire Falls Risk Reduction Task Force was established three years ago to address the problem of falls among older adults in the state of New Hampshire. They are committed to helping to reduce the incidence of falls and promoting falls risk reduction. For more information, please call the NH Falls Risk Reduction Task Force at **1-800-852-3345, Ext. 4700**.

Rhonda Siegel is a Health Promotion Advisor at the DHHS Office of Community and Public Health, Injury Prevention Program.

SAVINGS For Medicare Beneficiaries

by Karol Derman

Although Medicare provides some health care coverage for persons age 65 and older and for younger adults with disabilities, there are certain out-of-pocket expenses- such as premiums, co-insurance and deductibles- that Medicare beneficiaries are required to pay. These generally increase a little each year (see the listing of 2003 Medicare expenses at the end of this article).

New Hampshire has a program that helps eligible individuals pay for their Medicare deductibles and co-insurance. In order to qualify, you must:

- Have Medicare Hospital Insurance (Part A). If you’re not sure, you can find out by looking on your Medicare card or by calling Social Security at **1-800-772-1213**.

(continued on page 6)

New Hampshire Celebrates Wellness

Our mothers always said, “Your health is your most important asset”. And of course, mothers are always right!

NH Celebrates Wellness is dedicated to helping people in New Hampshire live healthy lives. One way we accomplish this is through our annual wellness conference, which provides information on current health initiatives to older adult wellness teams and other representatives from New Hampshire’s communities, schools and businesses. This year’s conference will be held June 24-26 at Waterville Valley.

The featured speaker at this year’s conference will be Dr. Martin Collis, who will use humor and music to show how healthy habits can be integrated into everyday living. Some of the other workshop topics include: Memory: Is it Lost or Hiding?; Yoga From Your Chair; Integrative Medicine: Making it Work for You; Debunking Diet Myths; Conversations with Outstanding Older Adults; and Social Norming.

Anyone may attend the first day of the conference. If you wish to attend all three days, you need to be a member of a wellness team (two or more persons who are willing to bring health initiatives back to their organization, peers, and community).

For conference registration information, please contact Jean Howey at NH Celebrates Wellness (**1-800-852-3345, Ext. 6888**). For information on senior wellness teams, contact Susan Morrison at the aforementioned telephone number or email smorrison@dhhs.state.nh.us Website: www.nhcw.com

SAVINGS (continued from page 5)

• Meet certain income and resource requirements. Resources include things like bank accounts, stocks and bonds. Some things are not counted, like the home you live in, one burial plot and some burial funds, automobile(s) and whole life insurance with a face value of less than \$1500.

Persons who are found eligible for the Medicare Savings Program could save as much as \$700 per year- money that could be used to pay for other medical expenses, such as prescription drugs. To learn more about the Medicare Savings Program, call the Health Insurance Counseling, Education and Assistance Service (HICEAS) toll-free at **1-800-852-3388** and ask to speak with a HICEAS volunteer. HICEAS volunteers can also answer other questions you may have about Medicare benefits.

You can also apply for the Medicare Savings Program by contacting a Department of Health and Human Services District Office (a listing of District Office telephone numbers can be found on the Directory Page of *Aging Issues*).

2003 Expenses for Medicare Beneficiaries

Medicare Part B Premium	\$58.70 per month (automatically deducted from a person’s Social Security check)
Medicare Part B Deductible (Part B pays for physician services)	\$100 per year
Medicare Part A Deductible (Part A pays for hospital services)	\$840 per benefit period
Inpatient Days 61 to 90 (refers to overnight hospital stays)	\$210 per day
Inpatient Days beyond 91 days	\$420 per day
Skilled Nursing Days 21 to 100 (refers to overnight stays in a skilled nursing facility)	\$105 per day

Karol Dermon is a DEAS Program Specialist focusing on Medicare and Medicaid issues.

Resource Update

From The Merrimack County Offices of Sheriff and Attorney. The CARES program offers free emergency cell phones to seniors. This program alters donated cell phones so that they can only connect to **9-1-1**. Seniors may request a free cell phone if they do not have a phone or if they drive and would like a phone in the car for emergencies. To request a phone or to donate one, call **225-5583**.

From ServiceLink of Belknap County. ServiceLink of Belknap County is supporting the development of a family caregiver network which will help connect caregivers to

one another through email, regular mail, and telephone networks. A caregiver “survival manual” is also in the works, and Caregiver Advocate Velma Olsen plans to work with a consumer advisory committee and other community organizations to increase awareness of caregiver needs. For more information, please call Velma at **524-7041**.

From Seacoast ServiceLink. Seacoast ServiceLink is proud to announce The Caregiver Lending Library! Family caregivers may now visit locations throughout the Seacoast Region and check out books,

Adult Protection (continued from page 2)

cannot address a situation until we are made aware of it through a report.

Reports may be made by telephone, in writing, or in person to any of the 12 Department of Health and Human Services District Offices (see the Directory Page of *Aging Issues* for office locations and telephone numbers). A DEAS staff member will take the report and if necessary, refer you to another appropriate resource.

Examples

These are some examples of people who received help through the Adult Protection Program (names have been changed for purposes of confidentiality):

Madeleine, 72, lives in her own home. Madeleine’s minister called DEAS to report that Madeleine was being threatened and intimidated by her unemployed, drug-addicted son George and George’s girlfriend Sally. Madeleine, who has rheumatoid arthritis, had allowed the two to move in with her on condition that they help with household chores. However, George and Sally were allegedly pressuring Madeleine into giving them money and doing nothing in return. Madeleine told her minister that when she asked George and Sally to leave, George threatened to hit her.

Following an investigation, a DEAS Social Worker determined that the report was founded. With the help of the DEAS Social Worker, Madeleine contacted a lawyer who assisted her in taking legal action to remove George and his girlfriend

from her home. The social worker also helped Madeleine to obtain home-maker services, and met with her regularly for three months to enable her to discuss her feelings about her son.

Harry, 81, had heart surgery six months ago and takes several medications. A neighbor who visited Harry called DEAS to report that the trailer he lived in was piled with debris and there was little or no food in the refrigerator. The neighbor also said that Harry seemed confused about his medication schedule. Following an investigation, DEAS determined that the report of self-neglect was founded. Staff arranged for home health services to assist Harry with daily care and the management of his medicines. At Harry’s request, staff also met with him twice a month to discuss his progress.

Helen, 42, suffers from multiple sclerosis. Helen gave her older sister Sharon power of attorney, which enabled Sharon to write checks against Helen’s bank account to pay for property taxes and other bills. However, Sharon began using Helen’s money to support herself, her husband, and her college-age son. As a result, Helen’s property taxes went unpaid, and the State placed a lien against her home. Following an investigation, a DEAS Social Worker determined that the report was founded. The social worker was able to help Helen find another person to take over the power of attorney, and to ensure that taxes and other bills were paid.

National Women’s Health Week

May 11-17, 2003



The Department of Health and Human Services is coordinating events to celebrate National Women’s Health Week in New Hampshire. The purpose is to raise awareness about simple, manageable steps women can take to improve their overall physical health and mental wellbeing. During the week, free health screenings will be offered around the state as well as special events for women and their loved ones to participate in, such as outdoor activities (e.g., hiking, birdwatching) and educational workshops. Additionally, WMUR TV-9 will feature healthy meal tips and recipes all week long on its Cook’s Corner segment at noon.

To learn more about National Women’s Health Week – and to see a listing of activities that will be taking place across New Hampshire – visit **www.4women.gov**. If you or your local agency are interested in partnering with the state health department in organizing a local special event, please contact Kathy Desilets at **271-4527**.

videos, audio tapes and periodicals on a variety of topics. This is a collaborative effort between Seacoast ServiceLink and other organizations. Current sites include Lane Memorial Library, Hampton; Parrott Avenue Place, Portsmouth; Cousins Adult Day Program, Seabrook; Rockingham Adult Medical Day Program, Brentwood. For more information, call Seacoast ServiceLink at **1-866-634-9412**.

From the Grafton County Senior Citizens Council (GCSCC). Seniors interested in learning computer skills can do so at the computer lab

located at the GCSCC Elder Services Building, 10 Campbell St. in Lebanon. At the lab, which was established a year ago, there are eight computers providing internet access. Brett Bourne, Lab coordinator, offers classes both for first timers and the more experienced. Suggested donation of \$2 per workshop. For more information, call **448-4213**. Sponsored by GCSCC and the Upper Valley Senior Center, with support from The Verizon Foundation, The Byrne Foundation, and The Upper Valley Community Foundation.

Calendar

State Committee on Aging Meetings

For information, call Peggy Knight at DEAS at 1-800-351-1888, Ext. 0549.

Area Committees on Aging

Meeting schedules and locations are subject to change. For more information, call the ACOA Chairperson listed on the directory page of *Aging Issues*.

Belknap - Third Tuesday of each month at 1pm, at varying locations

Carroll - Second Wednesday of each month at 1pm, at the Tri County CAP Resource Center, Route 16, Tamworth, NH

Cheshire (Monadnock Senior Advocates, covering Cheshire County and western Hillsborough County) - Third Wednesday of each month at 9 am, at varying locations

Coos - Second Tuesday of every even-numbered month (February, April, June, etc.) at 10 am, in varying locations.

Grafton - Fourth Monday of each month, at 9:30 am, at the Plymouth Regional Senior Center

Greater Manchester - Third Thursday of each month, at 1:30 pm, at varying locations

The New Hampshire ServiceLink Network

1-866-634-9412

www.state.nh.us/servicelink

Primary sites are listed below.

Belknap County ServiceLink:

Contact Person:

Lisa Morris, Program Director
Site: The HealthLink Building
PO Box 1327

Laconia, NH, 03247-1327

Local Line: 528-6945

Carroll County ServiceLink:

Contact Person:

Joanne Nicholson, Program Director
Site: 448 White Mountain Highway
PO Box 420, Chocorua, NH 03817
Local Line: 539-7203

Coos County ServiceLink:

Contact Person:

Janice Gingras, Program Director
Site: Berlin Senior Center
610 Sullivan St. – Suite 6
Berlin, NH 03570
Local Line: 752-6407

Northern Grafton County ServiceLink:

Contact Person:

Martha Reed, Program Director
Site: Littleton Area Senior Center
38 Cottage St., PO Box 98
Littleton, NH 03561
Local Line: 444-4498

Southern Grafton County ServiceLink:

Contact Person:

Dana Michalovic, Program Director
Site: Upper Valley Senior Center
10 Campbell St., P.O. Box 433
Lebanon, NH 03766
Local Line: 448-1835 or 448-4897

Manchester Region ServiceLink: (Northern Hillsborough County)

Contact Person:

Yvonne Schulze, Program Director
Site: Easter Seals NH
555 Auburn St.
Manchester, NH 03103
Local Line: 644-2240

Merrimack County ServiceLink:

Contact Person:

Beth Benson, Program Director
Site: Belknap/Merrimack CAP Building
PO Box 1016, 2 Industrial Park Dr.
Concord, NH 03302-1016
Local Line: 228-6625

Monadnock ServiceLink:

Contact Person:

Melinda Mahar, Program Director
Site: 103 Roxbury St.
Suite 302B
Keene, NH 03431
Local Line: 357-1922

Greater Nashua ServiceLink: (Southern Hillsborough County)

Contact Person:

Michelle Kingsley, Program Director
Site: Community Council of Nashua
7 Prospect St.
Nashua, NH 03060-3990
Local Line: 598-4709

Seacoast ServiceLink: (Eastern Rockingham County)

Contact Persons:

Julie Stone/Joe Byron,
Program Co-Directors
Site: 1039 Islington St.
Suite 118
Portsmouth, NH 03801
Local Line: 334-6593

Southwestern Rockingham County ServiceLink:

Contact Person:

Connie Young, Program Director
Site: The Nutfield Building
Suite 104
44 Birch Street
Derry, NH 03038
Local Line: 432-1499

Strafford County ServiceLink:

Contact Person:

Becky May, Program Director
Site: 1 Wakefield St., Suite 306
Rochester, NH 03867
Local Line: 332-7398

Sullivan County ServiceLink:

Contact Person:

Priscilla LaMott, Program Director
Site: Newport Senior Center
76 South Main St.
Newport, NH 03773
Local Line: 863-1358

Area Committees on Aging

Greater Nashua - Last Wednesday of each month, at 1:30 pm, at the Senior Activity Center on Temple St. in Nashua.

Merrimack - Third Tuesday of each month, at 10:30 am, at varying locations

Rockingham - Second Tuesday of each month, at 10 am, at varying locations

Strafford - Second Thursday of each month at noon at either The Wentworth Home in Dover or the VNA in Rochester.

Sullivan (Sullivan/Kearsarge Senior Advocates, covering Sullivan County and northwestern Merrimack County) - No meetings scheduled at this time. Interested persons may contact the committee chairs (see Directory Page of *Aging Issues*).

North Country Senior Action (Tri-County area, covering Coos, Carroll, and Grafton Counties) - Fourth Friday of each month, at 9:30 am, at varying locations.

Programs

The White Birch Community Center in Henniker offers **free** computer classes (beginner and intermediate) for seniors. Classes are held at 8:30 am on Mon, Wed., Thurs, Fri., and the computer room is open every day. The center also offers a variety of other programs during the week, including luncheons, speakers, movies, arts and crafts, and card games. Call **428-7860** for more information.

AARP's 55 Alive Driving Courses are driving safety courses specifically designed for people age 50 and older. Persons completing the course may be eligible for a reduction in their auto insurance premiums. To find out more about course schedules and locations, call AARP toll-free at **1-800-227-7669**.

A Caregiver's Education Series will be offered in Plymouth on the following Thursdays: **April 24** - Stress Management for Caregivers; **May 1** - Financial Concerns and Available Resources; **May 8** - Geriatric and Over the Counter Medications; **May 15** - Grief and Loss. Series conducted by Pemi-Baker Home Health and sponsored by So. Grafton Co. ServiceLink and the Plymouth Regional Senior Center. Call **536-1204** for more information.

CATV-Channel 6 (Upper Valley) - Informational programs for seniors and their caregivers, Tuesdays at 6 pm, hosted by Tom Hoyt of Mascoma Savings Bank. Produced by the Grafton County Senior Citizens Council and the Upper Valley Senior Center. Topics: estate planning, Hospice, long-term care insurance, and the AARP Tax Aide Program.

Alzheimer's and Memory Loss, an educational series, at the Upper Valley Senior Center in Lebanon. Dates/Topics: **May 6, at 1 pm** - Memory and Aging - What's Normal Memory Loss? **May 13, at 7 pm** - Impact on the Family; **May 20, at 1 pm** - Safe Return; **May 27 at 1 pm** - Community Resources for Caregivers. Sponsored by So. Grafton County ServiceLink and the Upper Valley Senior Center in collaboration with the Alzheimer's Association of Vermont and New Hampshire.

Support Groups

The Mens Discussion Group meets 2nd and 4th Wednesdays, 2:00-3:30 pm at the Community Council of Senior Citizens, 7 Junkins Avenue, in Portsmouth. A \$1 donation is requested for refreshments. Call **431-1980**.

Grandparents as Parents Support Group, 2nd Thursdays from 4-5 pm at the Grafton County Senior Citizens Council Center for Elder Services Bldg in Lebanon. Call **448-1835** for more information. Sponsored by So. Grafton Co. ServiceLink and the Upper Valley Senior Center.

Caregiver's Support Group, 1st Thursdays at 11:00 am at the Grafton County Senior Citizens Council Center for Elder Services Bldg. in Lebanon. Sponsored by So. Grafton Co. ServiceLink and the Upper Valley Senior Center.

Travel

The YMCA Active Older Adult's Club in Concord offers a number of interesting travel opportunities for members, both in the U.S. and overseas, as well as classes and other activities. Call **224-0411** for more information.

Volunteers Needed

The "In Good Company" Program is an intergenerational activity and discussion group for middle school kids and caring adults in the Seacoast area. The group meets weekly to enjoy art, cooking, board games and other activities. No special skills or training needed, just a warm heart and an interest in getting to know today's young teens. Call Susan Monday-Wyman at **422-8235, Ext. 115**.

Project Good Morning (continued from page 1)

which Eileen Douglass believes has helped Rochester area seniors to continue living safely in their own homes. "It would be great to see the program develop in other communities," she said.

For more information on Project Good Morning, you can contact the Rochester Police Department at **335-7527**.

Jack LaBonte, a member of the State Committee on Aging from Strafford County, assisted with this story.

Guide to Services

Division of Elderly and Adult Services (DEAS)

The NH Division of Elderly and Adult Services is a state agency providing services and programs to adults aged 60 and over, and to adults between 18 and 60 years of age who have a chronic illness or disability.

Director:	Catherine A. Keane
Central Office:	129 Pleasant Street, Brown Building Concord, New Hampshire 03301-3857
Toll Free Phone:	1-800-351-1888
TDDY:	1-800-735-2964
DHHS Internet:	www.dhhs.state.nh.us
District Offices:	For telephone numbers, see “Important New Hampshire Phone Numbers” listed below.

Information on DEAS Services and Programs:
Contact the District Office nearest your home (phone numbers are listed below) If you cannot reach the District Office, call 800-351-1888 .
NH ServiceLink Network: 866-634-9412
Adult Protection: To report suspected abuse, neglect, exploitation or self-neglect regarding an elderly or incapacitated adult, call the District Office nearest your home (phone numbers are listed below) If you cannot reach the District Office, call 800-351-1888, Ext. 4384 .
Alzheimer’s Program (Information, Respite Care): Call 800-351-1888 ext. 4687.
Senior Prescription Drug Discount Program: (For Persons Age 65 and Older): Call 888-580-8902
Long-Term Care Ombudsman: Call 800-442-5640

Important New Hampshire Phone Numbers

DEAS District Offices			
Berlin	800-972-6111 603-752-7800	Littleton	800-552-8959 603-444-6786
Claremont	800-982-1001 603-542-9544	Manchester	800-852-7493 603-668-2330
Concord	800-322-9191 603-271-3610	Nashua	800-852-0632 603-883-7726
Conway	800-552-4628 603-447-3841	Portsmouth	800-821-0326 603-433-8318
Keene	800-624-9700 603-357-3510	Rochester	800-862-5300 603-332-9120
Laconia	800-322-2121 603-524-4485	Salem	800-852-7492 603-893-9763

Area Committees on Aging

BELKNAP COUNTY Judy Pilliod 504 Province Rd. Belmont 03220 524-3047	HILLSBOROUGH COUNTY (Greater Nashua) Kay Noel 49 Lund St., Nashua 03060-4441 882-5502
CARROLL COUNTY Dorothy Solomon Box 993 Albany 03878 447-1199	MERRIMACK COUNTY Jacquelyne Jennings, Co-Chair 10 Ordway Ln., Bow 03304 224-1710 John Hoar, Co-Chair 82 Centre St., Concord 03301 228-8340
CHESHIRE COUNTY Martha Bauman 305 Roxbury St. Keene 03431 352-8725	ROCKINGHAM COUNTY Robert Forsing 12 Green Rd., Raymond 03077 895-9451
COOS COUNTY Norman Malloy, Co-Chair 129 Pine St., Berlin 03570 752-7913 Dona Larsen, Co-Chair 68 Marne Ave., Berlin 03570 752-2655	STRAFFORD COUNTY Becky May, Co-Chair Strafford Network-ServiceLink 1 Wakefield St., Suite 212 Rochester 03867 740-9594 Darlene Smith The Wentworth Home 795 Central Ave. Dover 03820 742-7406
GRAFTON COUNTY Elaine Vieira 258 Highland St., Plymouth 03264 536-2232	SULLIVAN COUNTY Theresa LaPointe, Co-Chair 7 Bank Avenue Claremont 03743 542-6418 Amy Patnaude, Co-Chair 4 Roseland Road Newport 03773 863-3070
HILLSBOROUGH COUNTY (Greater Manchester) Zane Knoy, Co-Chair Box 248, Manchester 03105 669-0449 Dennis Hett 345 Edward J Roy Drive Manchester 03102 626-3479	NO. COUNTY SR. ACTION Rosalie Downing 4 Langdon Rd., Plymouth, 03264 536-1115

Community Supplemental Food Program	800-942-4321
Consumer Protection For Public Utilities	800-852-3793
Consumer Protection For Insurance	800-352-3416
Senior Dental Clinic	603-271-7166
Eldercare Locator	800-677-1116
Food Stamp Information	800-852-3345
Foster Grandparent Program	800-536-1193
Fuel Assistance Information	603-271-8317
Governor’s Citizens Service	800-852-3456
HICEAS	800-852-3388 (<i>Health Insurance Counseling, Education Assistance</i>)
Legal Services Advice Line ...888-353-9944 or TTY:800-634-8989 (for Manchester residents only).....	603-624-6000
Living Will Information	603-225-0900
Medicaid Information	800-852-3345
Medicare Claims Information	800-447-1142 Part A: 800-522-8323, Part B: 800-447-1142 Quality of Care: 800-772-0151
NH Helpline	800-852-3388
NH ServiceLink Network	866-634-9412
Social Security Administration	800-772-1213
Veterans Council	800-622-9230 or 603-624-9230
Senior Companion Program	800-856-5525

State Committee on Aging

Hon. Peter Batula 12 Paige Dr. Merrimack 03054-2837 424-6091	Suzanne Keller 8 Queens Way Merrimack 03050 889-1776
Kenneth Brooks 49 Technology Dr., Apt. #57 Bedford 03110 647-4240	Albert “Jack” LaBonte 608 Tri-City Road Somersworth 03878 750-5110
Hon. Robert Chabot 73 Joseph St. Manchester 03102 625-5617	Dr. Mendon MacDonald (Chairman) 73 Schoolhouse Hill Rd. Gilford 03246 524-2515
Barclay Chase 40 Barker St. Keene 03431 352-4152	Margaret “Marge” McClellan 153 Bridge Street Berlin 03570 752-2479
Violet Constant 28 Portsmouth St. Concord 03301 225-5443	Dr. Joseph Miller 13 Burnham Ave. Durham 03824 868-1689
Darwin Farber 12 Meadowood Drive Exeter 03833 772-4341	Robert Montgomery 24 Mountain Rd. 3C Goffstown 03045 497-3992
Robert Forsing 12 Green Rd. Raymond 03077 895-9451	Susan Presby 83 Elm Street Littleton 03561 444-0335
Irene Gavin PO Box 16 Charlestown 03603 826-4218	Ellen Sheridan 9 Fiskill Farm Concord 03301 224-7612
	Dorothy Solomon Box 993 Albany 03818 447-1199

Aging Issues

A publication for New Hampshire's older citizens

Volume 7 Issue 2

Summer 2003

LTC Ombudsman Program Seeks Volunteers

If you'd like to make a difference in the lives of persons living in nursing homes and residential care facilities, consider volunteering with the Long Term Care Ombudsman Program.

The Long Term Care Ombudsman Program (LTCOP) receives, investigates and resolves complaints or problems concerning residents of nursing facilities, assisted living and residential care facilities. Other responsibilities include providing education and consultation to facility staff and advocating for legislation, policies and regulations that will assist residents.

Trained and certified volunteers help LTCOP fulfill its mission by visiting facilities on a regular basis,

helping to identify and resolve problems that residents may have, and advocating for the rights, safety and well-being of residents.

"Volunteers are the heart and soul of our program," says State Long Term Care Ombudsman Don Rabun. "They provide a regular presence in facilities. They are the ones whom residents and family members come to know and talk to about their experiences and problems, and they help LTCOP staff understand what daily life is like for our most frail and vulnerable elders."

In May, LTCOP began its latest volunteer recruitment and training drive. Judith Griffin was recently

(continued on page 6)



Volunteers Helen Gouveia (left) and Ann Kelley host the LTCOP exhibit at the Elder Info Expo in Portsmouth (May 7th, 2003). Photo by Lisa Hartley

New Project Will Coordinate Transportation In Merrimack County

People who live in Merrimack County and need rides to medical and other appointments will soon be able to call one central number to get help, thanks to a new pilot project coordinated by Central New Hampshire Transportation (CNHT). The project expects to serve a wide range of people, among them the elderly and persons with disabilities.

CNHT consists of several agencies in Greater Concord which provide transportation, among them Concord Area Transit (the public transportation program of Belknap-Merrimack Community Action), Riverbend Community Mental Health Services, HealthSouth, a for-profit rehabilitation hospital, Granite State Independent Living, an organization that supports persons with disabilities, and Havenwood Heritage Heights, a retirement community located in Concord.

Together these agencies have formed a transportation cooperative or "brokerage." Although each agency will maintain its own transportation program, agencies will share their schedules, vehicles and drivers with Concord Area Transit, the designated broker. Concord Area Transit will handle incoming requests for transportation and use its dispatching center and equipment to schedule and coordinate trips.

For example, if someone calls the CNHT phone line looking for a ride to work or to a doctor's appointment, staff will check to see which of the partner agencies has a vehicle available and at what time. This should result in faster, more effective services for callers, and save time and costs for the agencies.

(continued on page 5)

Piecing A Life Together: UNH Study Highlights Caregiver Needs

by Margaret Morrill

For families caring for frail elders, the experience can be likened to a patchwork quilt. It often consists of an uncertain mix of informal supports from relatives and friends, formal paid services and trial and error, according to "Piecing A Life Together," a study completed by the University of New Hampshire in March 2003.

Dr. Raelene Shippee-Rice, a member of the nursing faculty at the University of New Hampshire, conducted a statewide study of 278 family caregivers in cooperation with Amy Philbrick, MPH, of the NH Institute for Health Policy and Practice, and Dr. Andrew Smith of the UNH

Survey Center. The study was funded by the Division of Elderly and Adult Services. The information will be used by DEAS as it works to develop ways to support family caregivers.

These are some key findings from the study:

- Families are the primary source of care for older adults.
- Sixty-five percent of the persons needing care (care receivers) were over 80 years old and most are female. Common health problems included impaired mobility, heart disease, memory loss and incontinence.
- Most of the caregivers interviewed were age 50 or older, female,

(continued on page 2)

Senior Dental Clinic In Transition

As of June 30th, 2003, the NH Technical Institute (NHTI) in Concord will no longer be able to operate the Senior Dental Clinic due to limitations in space and resources.

Since 1981, the Senior Dental Clinic has provided dental care to persons age 60 and older who would not otherwise have had access to dental care. The clinic has provided oral exams, cancer screenings, cleanings and fillings, simple surgical procedures, restorations, dentures and partial dentures. These services have helped to reduce the incidence of dental disease and promote good health.

The Senior Dental Clinic has been funded under the Older Americans Act, through a contract between NHTI and the Division of Elderly and Adult Services. NHTI has provided the building, additional finan-

cial support, staff support and equipment. The clinic has also represented a valuable learning experience for students in the dental hygiene program, providing them with an opportunity to interact with older patients.

Dr. William Simonton, President of NHTI, indicated that the decision to close the Senior Dental Clinic was a difficult and painful one, made only after carefully considering other options. Although the clinic has benefited both seniors and students, New Hampshire is experiencing an oral health workforce shortage, especially with regard to dental hygienists and dental assistants.

"NHTI will need to focus attention on meeting these workforce needs by maximizing use of the limited space and resources in its facilities for the education of dental hygien-

ists and dental assistants, rather than a dental practice directed at seniors," said Dr. Simonton. "However, we continue to have concern for the lack of access to dental care in New Hampshire. NHTI will still welcome senior patients to the Dental Hygiene Clinic, where dental hygiene students provide preventive dental care to the public."

A letter listing other resources for dental care will be sent to all current patients of the Senior Dental Clinic.

"We appreciate all the services that the Senior Dental Clinic has provided in the past," said Catherine Keane, DEAS Director.

DEAS is planning to continue using the funds designated for senior dental care and will be inviting other dental care providers and clinics to submit proposals for establishing a new senior dental care site.

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Public Invited To Review State Plan on Aging

If you’d like to learn more about the services that DEAS plans to provide to New Hampshire’s older citizens, please consider attending one of the public comment sessions on the next State Plan on Aging.

Four public comment sessions have been scheduled at the following locations:

- June 16, 2003:** 10am-noon, at the United Methodist Church, 525 Lafayette Rd., Hampton (603-926-2702)
1:30-3:30pm at the Rochester Library, 65 South Main St., Rochester (603-332-1428)
- June 19, 2003:** 10am-noon, at the Pleasant View Retirement Community, 227 Pleasant St., Concord (603-225-3970)
- June 25, 2003:** 10am-noon, at the Cabot Motor Inn, Route 2, Lancaster (603-788-3346)

Refreshments will be served.
Please RSVP **1-800-351-1888, Ext. 4680.**

If you need one of the following access accommodations, please contact DEAS as soon as possible: wheelchair access or communication/vision access (sign language interpreter, assistive listening devices, CART (Real Time Captioning) or large print. Call DEAS at **1-800-351-1888, Ext. 8352.**

Staff from the Division of Elderly and Adult Services and the State Committee on Aging will present an overview of the State Plan, and there will also be time for discussion. This is a good opportunity for people to share their thoughts and concerns.

(continued on page 4)

With a Little Help

Information from the Long Term Supports Committee of the State Committee on Aging

SENIOR HOUSING IN NEW HAMPSHIRE

by Dennis R. Hett

Maybe your adult children have broached the subject. Maybe they’re thinking about having a “little talk” with you.

“Mom/Dad/Mom and Dad, isn’t it time you thought about selling the house and moving into something more manageable?”

Perhaps you’re already gathering information and beginning to plan.

Of course, you can stay where you are now. Just make sure that you can alter your environment to meet your needs as you age.

Did you know that your living arrangements contribute substantially to your well-being?

As you scan the newspapers, you will see advertisements for all sorts of retirement living options. If you have a difficulty figuring out what each one is, you’re with the majority. This is because the ads all appeal to our needs for security, friendship and something meaningful to do.

Here’s what you need to know about independent living options:

“**Fifty-Five-Plus**” housing is just now appearing in New Hampshire. These developments are designed for people who are about to retire, or who are in the early stages of retirement. Developers only sell to people who are over the age of 55, and who have no children living with them.

A question to ask when you call: Does the development offer a community center?

Traditional senior housing offers apartments for independent living. These developments are often sponsored by towns, cities or non-profit sponsors. They may charge reduced rents for qualified individuals. The New Hampshire Housing Finance Authority (NHHFA) maintains

a list of senior housing developments. Visit www.nhhfa.org or call **1-800-439-7247.**

A question to ask when you call: Does the development serve people who are eligible for HUD Section 8 rental subsidies?

Enriched senior housing (also known as “supportive housing,” “congregate housing” or even “assisted living”) is senior housing with services, such as meals, housekeeping and service coordination.

A question to ask when you call: Who provides the services, the sponsor or an outside provider? Who pays for the services? Contact The New Hampshire Housing Finance Authority (see above) for additional information.

“**A La Carte**” **retirement communities** combine housing and care options on a single site. Typical combinations include, apartments for independent living with nursing facility or residential care (“assisted living”). Arrangements are “pay-as-you-go,” without a guarantee that a nursing care bed will be available when needed. These developments usually call themselves “retirement communities.”

Questions to ask when you call: What services are available to apartment residents as a part of the monthly rental? How much do additional services cost? How are admissions to the assisted living or nursing facility handled?

So, if and when your adult children approach you and ask to talk about your living arrangement, ask them which option they are thinking about: 55+ housing, apartments for independent living, supportive housing, a retirement community or another arrangement with more services?

If you’re feeling bold, you might ask, tongue-in-cheek, if they’ve considered inviting you to move in with them!

Your Mental Health

UNDERSTANDING BIPOLAR DISORDER

by Bernie Seifert

When people I meet learn that I work in the mental health field, it is not unusual for them to ask me questions about specific conditions. One of the most commonly asked questions is, “What is the difference between ‘bipolar disorder’ and ‘manic-depression’?”

The answer: There is no difference – bipolar disorder and manic-depressive disorder are different names for the same condition.

Bipolar disorder causes extreme mood changes that alternate between episodes of depression and mania. The switching from one mood state to another is referred to as “cycling”. The frequency and durations of the mood cycles may vary greatly from person to person. One person may experience very rapid cycling of depression and manic episodes (sometimes up to four times in a year) while another may experience very infrequent episodes (sometimes only once or twice in a lifetime). An individual with this disorder may experience long periods — sometimes years — of normal mood in between episodes of mania and depression.

Over 3,000,000 Americans, or 1% of the population, have bipolar disorder, which occurs in equal numbers in both males and females. Symptoms typically begin between the ages of 15 and 25, but the actual diagnosis and treatment may not happen until several years later.

The cause of bipolar disorder is not known, but it has a tendency to run in families. A trained mental health clinician makes the diagnosis in conjunction with a physician (a physical exam is important in order to rule out other possible diseases).

The good news is that effective treatment is available. Medication, counseling, or often a combination of the two is used to treat the symptoms. Counseling may help someone learn to recognize what the early signs of their manic or depressed episodes are, so that early interventions (such as medication, reduced stress, increased rest, etc.) can be used to prevent or reduce the extreme mood symptoms.

Bipolar disorder can also affect the whole family. Family members should learn about this disorder and seek supportive counseling. The more informed and prepared family members are in coping with the symptoms of the illness, the better off the individuals, as well as the family as a whole, will be.

There are many sources of information available about bipolar disorder for both individuals who have it and their families. One very good source is a book by Mary Ellen Copeland called *The Depression Workbook: A Guide for Living with Depression and Manic Depression*. Additional information is available on the web site, www.mentalhealthrecovery.com. Family members may obtain information from the New Hampshire Chapter of The National Alliance for the Mentally Ill (NAMI-NH) by calling **1-800-242-NAMI (6264)**, or by logging on to the web site at www.NAMINH.org.

Bernie Seifert is the Consultant to the Older Adult Services Unit at the NH Division of Behavioral Health (DBH). DBH is the state agency that coordinates behavioral and mental health services and provides some funding to the regional community mental health centers.

Caregivers

(continued from page 1)

and providing anywhere from 6-15 hours of complex care daily. This included helping their loved one, or care receiver, with feeding, bathing, dressing, or toileting and other activities of daily living, and/or instrumental activities of daily living (shopping, cooking, household chores, managing finances).

- Managing behavioral problems such as aggression and wandering, providing companionship and emotional support, i.e. listening and encouragement, also figured high on the list of responsibilities.

- Most of those interviewed felt a strong sense of devotion toward their loved ones, but approximately two-thirds indicated that caregiving is very difficult for them: the emotional stress of watching a loved one deteriorate, the lack of free time, and negative effects on employment and relationships with others. Thirty-six percent of the caregivers interviewed have health problems of their own.

Caregivers who looked forward to the retirement years with their spouses have had their hopes thwarted by illness.

“This is not how we planned our
(continued on page 4)

Aging Issues

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Send news items, calendar announcements or other correspondence to NH DEAS, 129 Pleasant St., Concord, NH 03301-3857, Attn: Margaret Morrill for *Aging Issues*, or email mmorrill@dhhs.state.nh.us

ServiceLink Snapshots

Helping people connect with the services they need is what ServiceLink is all about. ServiceLink has helped thousands of people since it began operating in October 2000. Here are a few of their stories:

Starting From Where You Are

Joe is in frail health and lives alone without a telephone. He receives home-delivered meals from a nutrition provider that is also a ServiceLink satellite office. He has come to know and trust the driver who delivers the meals. The driver thought Joe would benefit from learning more about available services. One day the driver suggested that a ServiceLink staff member go along on the delivery route so that the driver could introduce her to Joe. The staff member was able to rearrange her schedule at short notice, meet Joe and provide him with resource information that he can use later on if he wishes.

Going Home Again

Ella was a resident of a nursing home for months, and was paying for care out of her own pocket. She agonized as her money melted away, but

felt too paralyzed by lack of information and local supports to find a way out. She wanted more than anything else to return home, but was advised by her doctor against going home alone. Ella's brother lives several states away and other family members live in Europe. ServiceLink staff met with Ella at the nursing home and communicated with family and friends via phone and email to help Ella develop a plan to return home. And she did! The plan, which was supported by medical professionals and family members, involved coordination with area home care providers, volunteers from Ella's church and helping Ella to arrange to rent a room in her home.

A New Beginning

Sarah, a 40-year old woman living with cerebral palsy, had just finished college in her Massachusetts home town, and wanted to relocate to Keene, NH for a new job and a fresh start. She was well informed about the services and supports available in Massachusetts, but felt overwhelmed

(continued on page 4)

The Law and You

The following question and answer is provided courtesy of Judith Jones, Director of the Senior Citizens Law Project for New Hampshire Legal Assistance.

Q: What is identity fraud, and how can I avoid being a victim?

A: The National Consumer Law Center reports that identity fraud is one of the fastest growing crimes in the United States. An identity thief solicits personal information, such a bank account number, credit card account number or Social Security number from an unsuspecting individual and then uses this information to steal. The bandit takes advantage of the victim's information and good credit history to charge on existing credit cards or even to open new credit accounts or to take out loans.

The National Consumer Law Center offers the following suggestions to avoid identity fraud:

- Never give out personal information or account numbers to strangers.
- Use a shredder to destroy papers that contain personal information.
- Do not carry your Social Security card or PIN number in your purse or wallet.
- Order and review your credit report regularly.

According to the New Hampshire Consumer Sourcebook, you should take the following four steps if you are a victim of identity theft:

1. Call the fraud department of the three major credit bureaus and ask that a "fraud alert" be placed on your file. These credit bureaus have made the following toll-free numbers specifically for the purpose of reporting fraud:

Equifax: 1-800-525-6285
Experian: 1-888-397-3742
TransUnion: 1-800-680-7289

2. Contact your creditors and speak to someone in the fraud or security department about the accounts that have been fraudulently used. After you make this telephone call you should request that the account be closed and then send a confirming letter. You should keep a copy of each of your letters.

3. File a police report and then get a copy of the report. You can file the report with the police in your own community or in the location where the fraud took place.

4. File a complaint with the Federal Trade Commission by calling **1-877-IDTHEFT**.

For more information, call, write or visit the web sites of the following organizations:

The Federal Trade Commission Identity Theft Clearinghouse, 600 Pennsylvania Ave., NW, Washington, DC 20580, Telephone: 1-877-ID-THEFT (1-877-438-4338); TDD: (1-202-326-2502). Web site: www.consumer.gov/idtheft

The Privacy Rights Clearinghouse, 3100 - 5th Ave., Suite B, San Diego, CA 92103, Telephone: 619- 298-3396. Web site: www.privacyrights.org

U.S. Public Interest Research Groups (PIRG) 218 D Street SE, Washington, D.C. 20003, Telephone: 202-546-9707. Web site: www.uspirg.org

NH Legal Assistance operates the Senior Advice Line, which is free and available to any NH resident who is age 60 or older. To speak with an attorney, call the Advice Line from 9am-noon on Mondays, Tuesdays, Thursdays and Fridays and from 1-4pm on Wednesdays. Toll-free number: **1-888-353-9944** or in Manchester only, **603-624-6000**. TTY: **1-800-634-8989**.

From The DEAS Director's Desk

Dear Reader:

May is a busy time of year. At long last, spring is with us and it is wonderful to get outside and to celebrate nature's rebirth. In Concord, we remain very busy working with the legislature on proposed bills that are being considered and on the budget for state fiscal years 2004 and 2005. Given the fiscal challenges that face the State of New Hampshire, this legislative session has been especially active.

Regular readers of *Aging Issues* will know that the legislature is debating how New Hampshire will finance long term supports for people who are eligible for nursing home level of care under the Medicaid program. When SB 409 was passed into law five years ago, it not only set the stage for reform of the long term support system, it changed the laws about how we pay for Medicaid long term supports. Under SB 409, the state and counties each pay 25% of the cost and the federal government pays 50% of the cost. This financing arrangement expires or sunsets on June 30, 2003. The legislature is considering HB 663 to decide how long term care funding will be paid in the future.

The legislature is also debating the amount of funding it will appropriate in the state budget for the next two fiscal years. For the Division of Elderly and Adult Services, this means that the legislature is reviewing requests to fund such supports as meals on wheels, transportation, home health, mid-level care and nursing homes, to name just a few of the supports funded by the budget. The debates reflect the fact that funding is scarce and that we cannot afford everything that we need or want. The Division of Elderly and Adult Services has participated in these debates with strong commitment to the vulnerable frail elderly and adults with disabilities that we support.

Remember, government is a reflection of its people. Our elected officials need to hear from you so that they know what their constituents want. It is in challenging times like this now that our representatives need to hear from us the most. Please consider making your voice heard. Your right to participate in how we govern ourselves is what makes our state and nation the best place in the world to live.

Sincerely,

Catherine A. Keane

SARS: Questions and Answers

The following is excerpted from a fact sheet developed by the NH Department of Health and Human Services (DHHS).

What is SARS?

SARS, which stands for Severe Acute Respiratory Syndrome, is a previously unknown virus that was first identified in Guangdong Province (China) and Hong Kong. It has since spread to dozens of countries, with thousands of people infected and hundreds dead. The outbreak, however, appears to be contained in all regions except China.

Where did SARS come from?

Evidence points to SARS originating in China, but investigation continues into its exact origin. Scientists are now sure that it is a virus that previously only infected animals and mutated (or changed) to a form that affects humans.

What kind of virus is it?

Scientists believe that SARS is caused by a coronavirus, which is the family of viruses that includes the common cold. The exact make-up of the virus was recently determined by the Centers for Disease Control and Prevention and others. Many scientists are working to develop a test for the disease.

What are the symptoms of SARS?

In general, SARS begins with a fever greater than 100.4°F (>38.0°C). Other symptoms may include headache, an overall feeling of discomfort, and body aches. Some people also experience mild respiratory symptoms. After 2 to 7 days, SARS patients may develop a dry cough and have trouble breathing.

How does SARS spread?

The principal way SARS appears to be spread is through droplet transmission, namely when someone sick with SARS coughs or sneezes droplets into the air and someone else breathes them in. It is possible that SARS can be transmitted more broadly through the air or from objects that have become contaminated.

What is the incubation period for SARS?

The time after exposure until someone gets sick is from 2 to 10 days, with the typical incubation period being 2 to 7 days.

How long is someone with SARS infectious to others?

Information to date suggests that people are most likely to be infectious when they have symptoms, such as fever or cough. However, it is not known how long before or after their symptoms begin that patients with SARS might be able to transmit the disease to others.

Does anyone die of SARS?

About 6% on average of the people who contract SARS die because they get a severe enough case and/or have a compromised immune system. Most people recover.

Who is at risk of getting SARS?

Cases of SARS continue to be reported mainly among people who have had direct, close contact with an infected person, such as those sharing a household with a SARS patient and health care workers who did not use infection control procedures while taking care of a SARS patient.

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Farmers’ Market Nutrition Program Provides Fresh Fruits and Vegetables

The Bureau of Nutrition and Health Promotion in the NH Department of Health and Human Services Office of Community and Public Health is pleased to announce that the Farmers’ Market Nutrition Program is available during the summer months for income eligible seniors.

The Farmers’ Market Nutrition Program (FMNP) provides coupons to income-eligible seniors, 60 years and older, to receive free fresh fruits, vegetables, and herbs at more than 35 farmers markets in New Hampshire. The program is funded by the US Department of Agriculture and is open to seniors enrolled in the Commodity Supplemental Food Program (CSFP).

“In New Hampshire, the Senior Farmers’ Market Nutrition Program is a win-win program for seniors and farmers across the state,” said Lisa Richards, Nutrition Services Manager for the Department’s Office of Community and Public Health. “The program improves the nutrition of participating low-income seniors who may be nutritionally at risk by helping them purchase fruits and vegetables at farmers’ markets. Area farmers benefit because the program

brings additional customers to their markets, and they spend both the coupons and often some of their own resources for farm products.”

CSFP provides monthly food packages to seniors, and foods include canned meat, canned fruits and vegetables, cheeses, pasta, cereal, and fruit juices. These foods are provided year round.

To enroll in CSFP, seniors must meet the following income guidelines: A person living alone can have an income of up to \$973 monthly or \$11,674 yearly. A household of two persons can have an income of up to \$1313 monthly or \$15,756 yearly.

The Farmers Market Nutrition Program provides free recipes and nutrition information on preparing healthy meals and snacks using fresh fruits and vegetables.

To find out if you are eligible for the Commodity Supplemental Food Program or the Farmers Market Nutrition Program, call **1-800-942-4321**.

CSFP and FMNP are equal opportunity programs.

Caregivers *(continued from page 2)*

golden years,” one woman said. “We thought after he retired, we would travel and do things. And now, here we are.”

- Most caregivers are unprepared for the responsibilities they assume, and don’t know what to expect, what to do or how to do it.

“You have to prepared to adjust every day,” said one of the interviewees.

- Many caregivers started with informal supports from other family members, friends and neighbors, and only added formal paid services (e.g. home health care, adult day care and respite) after something happened to trigger the need for services, or when they were referred by a health care professional or another provider.
- Although formal services are viewed as important, many interviewees said that navigating the existing service system was confusing and difficult; some compared it to being lost in a maze. Help is needed in locating appropriate services, understanding eligibility requirements, and finding a case manager who can help put it all together in a way that works. The shortage of direct care staff is also a problem. Said one interviewee: “I have looked for help and we fall between the cracks. Either he (the care receiver) doesn’t have the right diagnosis or we have too much money. But we don’t. So I have to piece things together the best I can. If it wasn’t for my mother being here, I couldn’t do this. I don’t know what I will do

because it is getting harder for her to get around and watch him when I go out.”

- Many caregivers recommended expansion of existing services, such as respite care (both in-home and “extended”, or overnight respite), more adult day care, more information about services and help in case management, especially in rural areas where there are fewer in-home services.

Other suggestions included development of health insurance plans for caregivers who aren’t eligible for other programs, and education on aspects of physical and behavioral care, available services, and health insurances, i.e. Medicare and Medicaid.

- Many caregivers could also use more help from friends, neighbors or volunteer organizations regarding chores, yard work, cooking, shopping errands, or friendly visiting.

Families need to be supported if elders are to remain in the community and avoid institutional care, the study concludes. This is also more cost-effective, since the cost of caring for an individual in a public nursing home setting is estimated to be \$36,000 annually. Policymakers, consumers, and other stake holders must work together to find solutions.

Raelene Shippee-Rice hopes that this study will encourage public recognition of the important role of family caregivers, as well as the needs of their loved ones.

“I came away in awe of the challenges family caregivers face and how they overcome them,” she said.

ServiceLink Snapshots *(continued from page 3)*

by trying to negotiate a new system of services-especially from a distance. ServiceLink staff was able to provide Sarah with comprehensive information about housing options, make calls on her behalf to facilitate her efforts to find housing in an area with limited options, and support her as she filled out applications and pursued leads. Now Sarah has moved to the Keene area, expects to start a new job in her field, and calls ServiceLink periodically when she needs more information about a particular resource.

Finding Support

Grace needed an advocate; she was 70 years old, divorced for five years and struggling with a sense of isolation and loss. Her ex-husband, as per their divorce decree, had paid for her supplemental health insurance. Two months ago, her policy was discontinued due to nonpayment. ServiceLink provided her with contact information for legal assistance and talked through options for addressing her emotional needs. It quickly became clear that Grace was overwhelmed and became confused and flustered when trying to explain her situation over the phone. She also made it clear that she had considered getting mental health counseling for many years, but was afraid of sharing her story. ServiceLink staff met Grace in her home. They assisted her in making calls to legal assistance and, with a few advance calls to providers, helped pave the way to a more comfortable entrance into the mental health system.

From Receiving Help To Giving Help

Velma cared for her husband Alfred, who had Alzheimer’s Disease, for 12 years before his death in December, 2002. As the disease progressed, Alfred needed help in all aspects of care. He was frequently awake at night, and needed supervision. He attended adult day care for several hours daily, and Velma used that time to sleep, since she did not get any rest at night. She had no time to herself. “You fall into a black hole,” said Velma. “You don’t realize how tired you are.” She was referred by her physician to the local ServiceLink site, which helped her locate resources such as respite care and legal and financial planning.

Velma is now a staff member at a ServiceLink site, where she helps other family caregivers to find necessary supports. One of the people she works with is **Melissa**, a family caregiver and single parent who gave up her job five years ago when her mother developed heart trouble and her father also became ill. Melissa’s mother has since died, and she and her son live with Melissa’s father, whose health has worsened and who needs help with meals, laundry and other tasks. Melissa often feels depressed and isolated (“I’ve cried a lot”), She has obtained helpful resource information from Velma and other ServiceLink staff, but to Melissa the biggest benefit is their sympathy and willingness to listen. “I don’t know what I’d do if I didn’t have someone to talk to,” she said.

This Gentle Craft

by Frederick Samuels

The paddles dip and two companions guide
the slim canoe, oh silvr’y craft of dreams
which swirl as gentle currents deep inside
pursue their ends in contemplative streams.
White lilies open, sun invades the gloom,
the heron swoops and turns to disappear
among the grasses; come, we’ll find him soon,
this blue and lanky marshland privateer.
So few the words which pass our lips, and yet
the silence speaks amid the winding stream
while wild birds chant their distant amourette
And skaters play their surface-tension scheme.
A pleasant pause in nature’s generous realm
– the waters calm where friendship takes the helm.

Frederick Samuels is a retired sociology professor and poet. He has published several books on sociology as well as To Spade The Earth and Other Poems (1999). His poems have also appeared in various journals.

Public Invited *(continued from page 2)*

The State Plan on Aging constitutes New Hampshire’s application for federal funds under the Older Americans Act. It provides NH citizens with a description of the services available to aging adults and adults with disabilities through the Older Americans Act, the Social Services Block Grant, Medicaid and other programs.

The current State Plan on Aging became effective on October 1, 2000 and expires on September 30, 2003. The next plan will be effective from October 1, 2003 to September 30th, 2005. The State Plan describes continued efforts to rebalance the service delivery system away from an emphasis on nursing facility care and toward a system focused on home and community based care.

More information on the State Plan on Aging is available on the DEAS web site at www.dhhs.state.us/DHHS/DEAS/ Click on “State Plan on Aging.”

Senior Center Update

National Senior Center week (May 12-17) was celebrated at senior centers throughout the state. This year’s theme from the National Institute of Senior Centers (NISC), a constituency of the National Council on the Aging, is: “Senior Centers Add More To Life!”

Belknap- Merrimack Community Action, which administers programs at nine area senior centers, sponsored open houses, art exhibits by senior participants, wellness fairs, workshops, and other special events. They also honored their 324 volunteers with a banquet on held on April 29th, 2003 at The Courtyard Marriott in Concord. These volunteers donated more than 22,000 hours of service during 2002. Call **603-225-3295** for information on senior centers in the Belknap-Merrimack County area.

The NH Association of Senior Centers (NHASC) will hold its annual meeting on **June 3, from 9-3pm** at the White Mountain Motel and Resort, West Side Rd., North Conway. The agenda will include discussion of proposed standards for services provided at senior centers, i.e. nutrition, health and wellness, social and recreational activities, transportation, information and referral, and other programs. The Association can be reached at **603-539-6851**.

The Mascoma Area Senior Center in Canaan is pleased to announce that Leona Ryder is the new director of the Center. Ryder previously served as respite program coordinator for the Upper Valley Support Group and as food program coordinator for LISTEN. She holds a B.A. in human services social work and counseling from Franklin Pierce College with graduate coursework in the marriage and family therapy program of Antioch New England Graduate School. She also holds an associates degree in radiological technology and has worked in that field both in Florida and Massachusetts. Call **603-523-4333** to learn more about programs offered by the Mascoma Senior Center.



Pictured here: Libbie Jenkins, age 8, Marilyn Bergeron (center) and Barbara Jenkins, Daisy Scout leader. Photo by Carol Gerken, Meredith Senior Center Director.

Dressed Up For Spring

From The Meredith Senior Center: There were good times galore when the Daisy and Brownie Scouts from Inter-Lakes Elementary School and their leaders joined the Lady Senior Lakers on April 14th for tea sandwiches, desserts and bingo games. Some Daisy and Brownie Scouts created their own hats, and those who won at bingo chose prizes provided by seniors and had their pictures taken with scout leaders.

New Project (continued from page 1)

“All resources will be located in a single dispatch system,” said Mickey McIver, CAT director, who has also acted as a consultant to CNHT. Over the next year, CAT will also track and report ridership, mileage and expenses to the partner agencies, and work to identify transportation needs in Merrimack County that are still unmet.

There will also be safety standards and training for drivers. The costs to riders will depend on the distance traveled. Also, if a rider is receiving services from one of the partner agencies, costs of transportation would be covered by that agency.

The CNHT project had its beginnings more than three years ago, when The Community Provider Network of Central NH, an association of human service agencies, identified transportation as a principle need to improve the quality of life for residents of the Greater Concord community. A transportation committee was formed, and Mickey McIver was asked to work with the committee as it shared ideas and developed strategies.

This led to a study funded by the Department of Transportation, which indicated that a coordinated system, using existing providers, could increase transportation services in the region. The participating agencies chose the broker/provider model as the most efficient one for this venture. In this model, the transit system in place utilizes the available dispatching system and serves as the contractor for the partners, and as one of the service providers.

(continued on page 6)

Food Buying Cooperative Helps Volunteers

Would you like to obtain discounts on food in return for two hours of volunteer work per month? If so, you may want to join Serve New England.

Serve New England is a non-profit organization and food buying cooperative for people who volunteer at least two hours per month anywhere in their communities. Every month Serve New England Co-op participants can order frozen meats, vegetarian items, fresh fruits and vegetables, while saving 30%-50% off the retail price of these foods.

Serve was started by Carl Shelton, a Californian who worked with Mother Teresa in Calcutta, India, in the early 1980s. Mother Teresa challenged Shelton to return home to help the people in his own country. Shelton and other individuals in San Diego developed a program to encourage people to volunteer in their communities and using a food cooperative to reward them for their services. Serve eventually expanded throughout the United States.

Like the grocery stores, Serve New England purchases its food from local growers, suppliers and wholesalers and uses what they believe to be the best quality food available. There is no government surplus food or “seconds”. All food is purchased from the money paid by participants for food packages. Robert Falvey, located at Serve New England’s headquarters in Canton, Massachusetts, is responsible for purchasing the food and for quality control.

There are 350 Serve chapters throughout New England, and 35 in New Hampshire alone. All Serve chapters are staffed and operated by volunteers.

The only eligibility requirement for participating in Serve is that each participant must volunteer at least two hours per month. Participants can choose what they want to do for volunteer work and where.

On the monthly Saturday morning designated as customer pickup day, food is delivered from Serve’s Manchester distribution center directly to each Serve Chapter. On that day, an individual can go to his or her local Serve chapter, present a voucher attesting to volunteer hours performed at the time of food pick-up, accepts the food package and may reorder for the next month or another time if they choose. There is no limit on how many packages they can order. Volunteers may order by paying cash, going online or, for those receiving food stamps, using their EBT card.

Depending on the food package ordered, the cost may run from \$11 to \$18. Food packages typically include meats such as chicken, beef or pork, various vegetables, potatoes, fruits, stuffing, cookies and mixes. Packages often come with recipes to try. The \$18 package is a family meal package which includes 16 servings a cost of \$1.12 per serving.

Since 1998 Serve has also awarded scholarships to some of the most dedicated volunteers in New England. Serve’s cash scholarships, awarded each spring, are available to students of any age who will be attending a college or trade school in the fall of that year.

To locate the Serve chapter near you, or for more information about Serve scholarships call **1-888-742-7363** (toll-free). You can also find information online at www.servenewengland.org

Did I Miss That SOUND??

by Joan Marcoux

Have you ever missed a friend who knocked at your door for over an hour trying to get your attention? A door signaler such as a strobe light or flashing lamp can visually alert you and save time and inconvenience.

Did you miss that important phone call that you were waiting for because you were watching TV? I’ve waited hours for friends to call, only to find out later that they left messages on my voice mail because I didn’t answer. My dog Toby sometimes alert me when the telephone rings, but I also have a flashing light on the phone.

Binoculars for the ears? Yes, indeed! They are called assistive listening devices. Some are operated via an FM system that uses radio waves, while others employ an infra-red system, but both methods enhance the verbal information that is being expressed. Using a volume control, an individual with a hearing loss can increase the volume of his or her receiver to the desired comfort level, while the speaker on the other end uses a transmitter to communicate the verbal information.

Assistive listening devices can be used in one-to-one situations, in

classrooms, churches, theatres, and restaurants. Individuals can use headsets or neckloops with their receivers. Since I use hearing aids with T-coils, I use a neckloop (T-coils pick up the magnetic field generated by the loop). With the T-coil switch I can block out background noise and benefit from the amplification in my own hearing aids. This helps because I don’t have to use the headset in addition to my hearing aids.

Have you ever overslept, only to miss important appointments? Well, bed shakers and flashing lights can help ensure that this will never happen again! Some units have a combination of a flashing light and shakers, but I use what I call my tri-sensory modality. My unit has a shaker, flashing light and a ringer.

If you’d like more information on these and other technological aids, please contact me as described below.

Joan Marcoux is the Deaf and Hard of Hearing Specialist at the Division of Elderly and Adult Services, and can be reached by email at jmarcoux@dhhs.state.nh.us or by telephone at 1-800-351-1888. TDD Access: Relay NH: 1-800-735-2964

The Joy Of Learning

by Margaret Morrill

"I've never seen you smile so much", Joan Laflamme's husband told her when she received her Associates in Arts degree from Rivier College (Nashua) last May.

Laflamme had a lot to smile about; at age 72, after waiting five decades, she was fulfilling her lifelong dream of higher education and her family, which now includes 17 grandchildren and four great-grandchildren, celebrated along with her.

Laflamme grew up in Nashua and graduated from Nashua High School in 1946. She was accepted at what was then Mount St. Mary's College and also at Rivier College. However, Albert, her husband-to be, was newly returned from service in World War II, and she chose to get married instead.

The ensuing years were happy ones; the couple raised four boys and three girls. Laflamme worked as an office manager for an ophthalmologist in Nashua. Her husband taught music and is executive director of The Spartans, a drum and bugle corps for youth that he founded in 1955. The Spartans have since taken part in several Presidential inaugural parades and other events throughout the U.S. and have also won international championships.

After retiring in 1994, Laflamme decided to take up her studies where she left off and enrolled in an introductory computer course at Rivier. As a senior citizen, she was eligible for a tuition discount.

"I was the oldest person in the class," she recalled, "but I had a wonderful time." One course led to another, and in 1996 she enrolled in the Associates in Arts Degree program.



Joan Laflamme, Albert, her husband of 56 years, and two of their grandchildren celebrate Joan's graduation in May 2002.

"My children had gotten their degrees, and I wanted mine too."

For the next several years, Laflamme took courses in writing and literature, math, science and history. She says that studying again wasn't always easy to do, but she enjoyed her courses and is grateful for the encouragement and support she received from Dr. Regina Shearer and other faculty members at Rivier. Laflamme's family was also supportive, and one grandson tutored her in math.

Although Laflamme received her Associates in Arts degree last May, she hasn't stopped there. She's now pursuing a bachelor's degree in communications at Rivier. And after that? She'd like to write, and has a book in mind about her family and the interesting trips that she and her husband have taken with The Spartans.

And she'll go on learning. "Education is something that no one can take away from you," she said.

New Project *(continued from page 5)*

The study also indicated that although a number of agencies were providing transportation in Greater Concord, lack of coordination meant that vehicles were often under-utilized. "We were wasting a lot of miles," commented McIver. He offered this example: "On a given afternoon, vans from Community Action and Riverbend might each be picking up a single client on the same block at the same time. However, under the new system these requests can be coordinated, and one vehicle can pick up the same two people."

The CNHT project should save time, costs and mileage and create the potential for expanded services.

Transportation brokerages have been used successfully in other states as budget constraints and the increasing need and demand for transportation cause agencies to look at how they can make the most of available resources.

The pilot project is being funded over the next 12 months through a grant from the Endowment for Health and the NH Charitable Foundation. The Division of Elderly and Adult Services has also provided funds for communications equipment needed by the brokerage. CNHT will be looking ways to sustain funding when the grant period ends.

Mickey McIver expects the CNHT project to be up and running within the next few months, and is enthusiastic about its potential for helping both consumers and the partner agencies. "Sharing resources is what it's all about," he said.

The brokerage concept is also being explored in the Derry-Salem area and in the northern part of the state.

For more information on the CNHT project, call Concord Area Transit at 603-225-1989.

LTC Ombudsman

(continued from page 1)

appointed as Volunteer Coordinator. Griffin brings to her position 15 years of experience in the Office of the Long Term Care Ombudsman and 25 years of experience in the fields of gerontology and long term care. She hopes to see an increase in the number of volunteers.

"Of the 10,000 individuals currently residing in long term care facilities, there are only enough ombudsman volunteers to serve one third of that number," says Griffin. "The others need and are entitled to this same access and assistance."

Volunteers come from all walks of life. The primary qualifications are good communications skills and an interest in the elderly, with a commitment to improving the quality of life and care of facility residents.

John Franklin, 80, has been a certified ombudsman volunteer for ten years. His interest was prompted by his experience working with elders in the home health field. At one point he was visiting 12 facilities and logging a few hundred miles per month, but now visits only three or four. "I've cut back a little," he chuckled.

Franklin makes a point of visiting new residents and listening to their concerns. The issues he has helped to resolve range anywhere from complaints about cold food to helping a resident who feels isolated to change room locations, to helping a resident who has trouble communicating his or her needs to facility staff. This takes time and patience, especially with residents who are experiencing confusion or memory loss.

Once Franklin knows what the problem is, he discusses it with facility staff, usually the social services director or the director of nurses. If he encounters an especially difficult situation, he will consult with LTCOP staff, but most of the time he can work things out. "Nine times out of ten, facility staff are ready to help you," says Franklin.

Helen Gauveia, another veteran ombudsman volunteer, says she finds the work very gratifying.

"It's a wonderful opportunity to contribute to my community in a very significant and meaningful way. I know I'm making a difference in the lives of the elders I work with."

Prior to being certified, volunteer ombudsman candidates are interviewed and screened, and complete a comprehensive training program about the mission and goals of the LTCOP program, the rights and needs of facility residents, communication and advocacy skills, Alzheimer's disease and other dementias, and other relevant topics. They also participate in supervised visits to facilities.

Once certified, volunteers are assigned to one or more facilities based on their availability and level of experience, and are asked to commit 10 hours per month. The schedule of visits varies depending on the facility, but visits are generally an hour or two in length. Mileage is reimbursed by the State of New Hampshire.

SARS *(continued from page 3)*

Is there a test to see if someone has SARS?

No "test" is available yet for SARS; however, CDC, in collaboration with the World Health Organization and other laboratories, has developed two research tests that appear to be very promising in detecting antibodies to the new coronavirus. CDC is working to refine and share this testing capability as soon as possible with laboratories across the United States and internationally.

Is there a treatment for SARS?

There is no cure or specific treatment, since cases differ in symptoms and severity, but it is recommended that patients receive the same treatment that would be used for anyone with serious community-acquired atypical pneumonia of unknown cause.

What can I do to prevent getting SARS?

The CDC recommends several precautions people can take to help prevent contracting SARS:

- Wash hands frequently with soap and hot water or with an alcohol-based hand wash;
- Cover your mouth when you cough or sneeze, then wash your hands;
- Consider postponing all unnecessary travel to regions affected by SARS, including mainland China; Hong Kong; and Taiwan;
- Avoid sharing eating utensils; and
- See a doctor if you are experiencing any of the symptoms of SARS.

If I think I have been exposed to SARS what should I do?

If you think you or someone in your family might have SARS, you should:

- Consult a health care provider as soon as possible and
- Cover your mouth and nose with tissue when coughing or sneezing. If you have a surgical mask, wear it when you are around others. A mask can reduce the number of droplets coughed into the air.

For specific concerns or questions about SARS, call the NH Department of Health and Human Services, Bureau of Communicable Disease Control at 603-271-4496 or 800-852-3345 x4496. For further information, refer to the Centers for Disease Control and Prevention website at www.cdc.gov or the World Health Organization website at www.who.org

LTCOP staff provide ongoing support and guidance to volunteers and hold statewide quarterly meetings where volunteers can share common concerns and receive continuing education.

"Once involved, our wonderful volunteers have a tendency to stay involved," commented Judith Griffin. "Some have been with us for many years."

To apply to become a volunteer ombudsman or for more information, please contact Judith Griffin at 1-800-442-5640 or 271-4375 or email jgriffin@dhhs.state.nh.us

Calendar

State Committee on Aging Meetings

For information, call Peggy Knight at DEAS at 1-800-351-1888, Ext. 0549.

Area Committees on Aging

Meeting schedules and locations are subject to change. Some committees may not meet during the summer months. For more information, call the ACOA Chairperson listed on the directory page of *Aging Issues*.

Belknap - Third Tuesday of each month at 1pm, at varying locations

Carroll - Second Wednesday of each month at 1pm, at the Tri County CAP Resource Center, Route 16, Tamworth, NH

Cheshire (Monadnock Senior Advocates, covering Cheshire County and western Hillsborough County) - Third Wednesday of each month at 9 am, at varying locations

Coos - Second Tuesday of every even-numbered month (February, April, June, etc.) at 10 am, in varying locations.

Grafton - Fourth Monday of each month, at 9:30 am, at the Plymouth Regional Senior Center

Greater Manchester - Third Thursday of each month, at 1:30 pm, at varying locations

Area Committees on Aging

Greater Nashua - Last Wednesday of each month, at 1:30 pm, at varying locations.

Merrimack - Third Tuesday of each month, at 10:30 am, at varying locations

Rockingham - Second Tuesday of each month, at 10 am, at varying locations

Strafford - Second Thursday of each month at noon at either The Wentworth Home in Dover or St. Mary’s Church in Rochester.

Sullivan (Sullivan/Kearsarge Senior Advocates, covering Sullivan County and northwestern Merrimack County) - Second Tuesday of each month, at 9:30 am, at varying locations

North Country Senior Action (Tri-County area, covering Coos, Carroll, and Grafton Counties) - Fourth Friday of each month, at 9:30 am, at varying locations.

Support Groups

Self-Help for the Hearing-Impaired (SHHH) will conclude its 2002-2003 year with a program on **June 4 at 6:00pm**, at Prime Time, 195 McGregor St, Manchester. The movie, “Sound or Silence” will be shown, followed by a program entitled “Cochlear Implants: Do They Make A Difference?”. Refreshments to follow.

Special Events

A **Standing Ovation**, a celebration for the older adults of the Greater Monadnock community, will be held on **June 14th from 8:30-2:00 pm**, at the Keene Recreation Center. Free. Keynote speaker: Doris Haddock of Dublin, NH, better known as Granny D. Morning coffee, a Flag Day cookout with door prizes, and you can find helpful information at featured workshops and exhibits. Register by **June 6** to assure your place. Pick up a registration form at the Keene Senior Center, The Woodward, or any HCS senior meals site. Call **352-6351** for more information.

The Granite State Senior Games (GSSG) Needs You! Scheduled for the week of **August 3rd**. 15 different competitive sports with over 50 events held at various venues in a central location. Open to athletes 50+. Competitions held separately for women and men and in five-year age groupings. Call **622-9041** for more information or log on to **www.nhseniorgames.org**

GSSG and Hillcrest Terrace Retirement Community will also present **The Bedford Big Band** in concert on **July 20, at 7pm**, at the Derryfield School Auditorium in Manchester. Tickets \$15. Call **622-9041 or 622-1690**.

The Rivier Institute for Senior Education (RISE) will hold an open house on **August 13, 2003 from 7:30 am to 1pm**, at the Education Center, Demoulas Room, at Rivier College, Clement St., Nashua. Information and registration for interesting fall courses in the arts, literature, computer skills and other topics. Call **893-9763** for more information.

Recreation and Travel

NH Calendar of Events. Log on to **www.visitnh.gov/events** to find a listing of outdoor activities, concerts, plays, festivals and other special events. A guide can also be found at Chamber of Commerce offices and at highway rest areas/information centers.

Elderhostel offers many educational travel opportunities for people 55+, both in the U.S. and overseas. Log on to **www.elderhostel.org** for further details.

The Golden Age Passport can be purchased by citizens or permanent residents of the U.S. who are 62 or older for a onetime \$10 fee, and provides admission to all National Parks, historic sites, monuments, national wildlife refuges. Also allows a 50% discount on federal use fees charged for camping, boating, etc. Must be purchased in person at any national park, historic site, wildlife refuge or other federal fee area. Log onto **www.nps.gov/fees_passes** or call **1-888-GO-PARKS** for more information.

Americans Living and Traveling Abroad is a federal government web site providing detailed information on many topics. Log onto **www.firstgov.gov/Americans_Abroad**.

The New Hampshire ServiceLink Network

1-866-634-9412

www.servicelink.org

Primary sites are listed below.

Belknap County ServiceLink:

Contact Person:

Lisa Morris, Program Director
Site: The HealthLink Building

PO Box 1327

Laconia, NH, 03247-1327

Local Line: 528-6945

Carroll County ServiceLink:

Contact Person:

Joanne Nicholson, Program Director
Site: 448 White Mountain Highway

PO Box 420, Chocorua, NH 03817

Local Line: 539-7203

Coos County ServiceLink:

Contact Person:

Janice Gingras, Program Director

Site: Berlin Senior Center

610 Sullivan St. – Suite 6

Berlin, NH 03570

Local Line: 752-6407

Northern Grafton County ServiceLink:

Contact Person:

Martha Reed, Program Director
Site: Littleton Area Senior Center

38 Cottage St., PO Box 98

Littleton, NH 03561

Local Line: 444-4498

Southern Grafton County ServiceLink:

Contact Person:

Dana Michalovic, Program Director
Site: Upper Valley Senior Center

10 Campbell St., P.O. Box 433

Lebanon, NH 03766

Local Line: 448-1835 or 448-4897

Manchester Region ServiceLink:

(Northern Hillsborough County)

Contact Person:

Yvonne Schulze, Program Director
Site: Easter Seals NH

555 Auburn St.

Manchester, NH 03103

Local Line: 644-2240

Merrimack County ServiceLink:

Contact Person:

Beth Benson, Program Director
Site: Belknap/Merrimack CAP Building

PO Box 1016, 2 Industrial Park Dr.

Concord, NH 03302-1016

Local Line: 228-6625

Monadnock ServiceLink:

Contact Person:

Melinda Mahar, Program Director
Site: 103 Roxbury St.

Suite 302B

Keene, NH 03431

Local Line: 357-1922

Greater Nashua ServiceLink:

(Southern Hillsborough County)

Contact Person:

Michelle Kingsley, Program Director
Site: Community Council of Nashua

7 Prospect St.

Nashua, NH 03060-3990

Local Line: 598-4709

Seacoast ServiceLink:

(Eastern Rockingham County)

Contact Persons:

Julie Stone/Joe Byron,
Program Co-Directors
Site: 1039 Islington St.

Suite 118

Portsmouth, NH 03801

Local Line: 334-6593

Southwestern Rockingham County ServiceLink:

Contact Person:

Connie Young, Program Director
Site: The Nutfield Building

Suite 104

44 Birch Street

Derry, NH 03038

Local Line: 432-1499

Strafford County ServiceLink:

Contact Person:

Becky May, Program Director
Site: 1 Wakefield St., Suite 306

Rochester, NH 03867

Local Line: 332-7398

Sullivan County ServiceLink:

Contact Person:

Priscilla LaMott, Program Director
Site: Newport Senior Center

76 South Main St.

Newport, NH 03773

Local Line: 863-1358

Guide to Services

Division of Elderly and Adult Services (DEAS)

The NH Division of Elderly and Adult Services is a state agency providing services and programs to adults aged 60 and over, and to adults between 18 and 60 years of age who have a chronic illness or disability.

Director:	Catherine A. Keane
Central Office:	129 Pleasant Street, Brown Building Concord, New Hampshire 03301-3857
Toll Free Phone:	1-800-351-1888
TDD Access:	
Relay NH	1-800-735-2964
DHHS Internet:	www.dhhs.state.nh.us
District Offices:	For telephone numbers, see “Important New Hampshire Phone Numbers” listed below.

Information on DEAS Services and Programs:
Contact the District Office nearest your home (phone numbers are listed below) If you cannot reach the District Office, call 800-351-1888 .
NH ServiceLink Network: 866-634-9412
Adult Protection: To report suspected abuse, neglect, exploitation or self-neglect regarding an elderly or incapacitated adult, call the District Office nearest your home (phone numbers are listed below) If you cannot reach the District Office, call 800-351-1888, Ext. 4384 .
Alzheimer’s Program (Information, Respite Care): Call 800-351-1888 ext. 4687.
NH Senior Prescription Drug Discount Program: (For Persons Age 65 and Older): Call 888-580-8902
Long-Term Care Ombudsman: Call 800-442-5640

Important New Hampshire Phone Numbers

DEAS District Offices			
Berlin	800-972-6111 603-752-7800	Littleton	800-552-8959 603-444-6786
Claremont	800-982-1001 603-542-9544	Manchester	800-852-7493 603-668-2330
Concord	800-322-9191 603-271-3610	Nashua	800-852-0632 603-883-7726
Conway	800-552-4628 603-447-3841	Portsmouth	800-821-0326 603-433-8318
Keene	800-624-9700 603-357-3510	Rochester	800-862-5300 603-332-9120
Laconia	800-322-2121 603-524-4485	Salem	800-852-7492 603-893-9763

Area Committees on Aging

BELKNAP COUNTY Mary Frost 101 Old Lake Shore Rd. Gilford 03249 524-2974	HILLSBOROUGH COUNTY (Greater Nashua) Kay Noel 49 Lund St., Nashua 03060-4441 882-5502
CARROLL COUNTY Dorothy Solomon Box 993 Albany 03878 447-1199	MERRIMACK COUNTY Jacquelyne Jennings, Co-Chair 10 Ordway Ln., Bow 03304 224-1710 John Hoar, Co-Chair 82 Centre St., Concord 03301 228-8340
CHESHIRE COUNTY Martha Bauman 305 Roxbury St. Keene 03431 352-8725	ROCKINGHAM COUNTY Robert Forsing 12 Green Rd., Raymond 03077 895-9451
COOS COUNTY Norman Malloy, Co-Chair 129 Pine St., Berlin 03570 752-7913 Dona Larsen, Co-Chair 68 Marne Ave., Berlin 03570 752-2655	STRAFFORD COUNTY Becky May, Co-Chair Strafford Network-ServiceLink 1 Wakefield St., Suite 212 Rochester 03867 740-9594 Darlene Smith The Wentworth Home 795 Central Ave. Dover 03820 742-7406
GRAFTON COUNTY Elaine Vieira 258 Highland St., Plymouth 03264 536-2232	SULLIVAN COUNTY Theresa LaPointe, Co-Chair 7 Bank Avenue Claremont 03743 542-6418 Amy Patnaude, Co-Chair 4 Roseland Road Newport 03773 863-3070
HILLSBOROUGH COUNTY (Greater Manchester) Zane Knoy, Co-Chair Box 248, Manchester 03105 669-0449 Dennis Hett 345 Edward J Roy Drive Manchester 03102 626-3479	NO. COUNTY SR. ACTION Rosalie Downing 4 Langdon Rd., Plymouth, 03264 536-1115

Community Supplemental Food Program	800-942-4321
Consumer Protection For Public Utilities	800-852-3793
Consumer Protection For Insurance	800-352-3416
Eldercare Locator	800-677-1116
Food Stamp Information	800-852-3345
Foster Grandparent Program	800-536-1193
Fuel Assistance Information	603-271-8317
Governor’s Citizens Service	800-852-3456
HICEAS	800-852-3388 (<i>Health Insurance Counseling, Education Assistance</i>)
Legal Services Advice Line ...888-353-9944 or TTY:800-634-8989 (for Manchester residents only).....	603-624-6000
Living Will Information	603-225-0900
Medicaid Information	800-852-3345
Medicare Claims Information	800-447-1142
Part A: 800-522-8323, Part B: 800-447-1142	
Quality of Care: 800-772-0151	
NH Helpline	800-852-3388
NH ServiceLink Network	866-634-9412
Social Security Administration	800-772-1213
Veterans Council	800-622-9230 or 603-624-9230
Senior Companion Program	800-856-5525

State Committee on Aging

Hon. Peter Batula 12 Paige Dr. Merrimack 03054-2837 424-6091	Suzanne Keller 8 Queens Way Merrimack 03050 889-1776
Kenneth Brooks 49 Technology Dr., Apt. #57 Bedford 03110 647-4240	Albert “Jack” LaBonte 608 Tri-City Road Somersworth 03878 750-5110
Hon. Robert Chabot 73 Joseph St. Manchester 03102 625-5617	Dr. Mendon MacDonald (Chairman) 73 Schoolhouse Hill Rd. Gilford 03246 524-2515
Barclay Chase 40 Barker St. Keene 03431 352-4152	Margaret “Marge” McClellan 1156 West Milan Rd. Milan 03588 449-2014
Violet Constant 28 Portsmouth St. Concord 03301 225-5443	Dr. Joseph Miller 13 Burnham Ave. Durham 03824 868-1689
Darwin Farber 12 Meadowood Drive Exeter 03833 772-4341	Robert Montgomery 24 Mountain Rd. 3C Goffstown 03045 497-3992
Robert Forsing 12 Green Rd. Raymond 03077 895-9451	Susan Presby 83 Elm Street Littleton 03561 444-0335
Irene Gavin PO Box 16 Charlestown 03603 826-4218	Ellen Sheridan 9 Fiskill Farm Concord 03301 224-7612
	Dorothy Solomon Box 993 Albany 03818 447-1199

Aging Issues

A publication for New Hampshire's older citizens

Volume 7 Issue 3

Fall 2003

NH Honors Vaughan Award Winners

by Margaret Morrill and Roger Vachon

On June 5th, 12 outstanding senior volunteers received the 2003 Joseph D. Vaughan Awards at a ceremony held at the State House in Concord. Among those present were members of the State Committee on Aging, including SCOA Chairman Dr. Mendon MacDonald, DHHS Commissioner Nicholas Vailas, and former DEAS Director Catherine Keane.

The Vaughan Awards were initiated in 1962 in memory of Joseph D. Vaughan, a New Hampshire legislator who was an early advocate on behalf of seniors. Each year, the awards are presented to one senior or one couple – over the age of 60 – from each county who have demonstrated outstanding leadership and volunteer service.

Whether delivering meals, visiting the sick and the lonely, teaching children to read, or advocating for those in need, Vaughan Award recipients make New Hampshire a better place to live. *Aging Issues* is proud to present this year's winners:

JUDY PILLIOD (Belknap County): She has frequently championed the needs of elders by testifying at legislative hearings on affordable housing, long term care, and other issues. Organized a public forum on prescription drug issues in 2000. Chair of the NH Collaborative Council on Aging, board member of NH ServiceLink, and a member and past chair of the Belknap Area Committee on Aging.

HENRY AND BARBARA ANDERSON (Carroll County): Since renovating their lovely motel on Silver Lake into senior housing during the 1980's, the Andersons have been the ultimate good neighbors to their tenants, providing much volunteer transportation and friendly support. They also volunteer to host the congregate meals site (affiliated with the Gibson Center) in Madison, often providing special celebrations. Members of Carroll County RSVP and the Madison Church.

MARTHA BAUMAN (Cheshire County): A talented author who contributes to "Wit and Wisdom", a column on aging published by *The Keene Sentinel*, she also chairs the Monadnock Senior Advocates, is a board member of the NH Housing Authority, and volunteers for "Neighbors In Deed" and "Project Chore" in Keene. Helped start "Standing Ovation", an annual event in Keene which honors seniors. Said one associate, "she sets the gold standard for contributing and community building, and with great humility."

EDGAR AND GLORIA MARCHAND (Coos County): RSVP volunteers since 1996, the Marchands contributed 1000 hours of service last year alone at senior meal sites and other locations. Members of North Country Senior Action and the Coos Area Committee on Aging, and the NH Collaborative Council on Aging. Frequently travel to Concord to testify at legislative hearings on the needs of elders. "They will not give up on a good cause," said one acquaintance.

THOMAS S. BROWN, M.D. (Grafton County): A retired physician who specialized in family practice for 30 years in the Upper Valley. He delivers meals three times weekly for the Upper Valley Senior Center. Member, board of directors, of the Grafton County Senior Citizens Council, and an active member of their capital campaign committee. Member of St. Thomas Episcopal Church of Hanover.

ZANE KNOY (Hillsborough County): Professor Emeritus of Springfield College in Manchester, he is recognized by friends and associates as a dedicated and energetic advocate. Founding member of the Greater Manchester ServiceLink branch, past chair of the Manchester Regional Committee on Aging and a member of the Southern New Hampshire Eldercare Council. Helped establish SuccessAbility, a day-long event held annually in Manchester to introduce community leaders to situations which persons with disabilities experience in their everyday lives.



At the Vaughan Award ceremony. Front Row (L to R): Martha Bauman, Bunny Perry, Judy Pilliod, Janet Conroy (behind Judy Pilliod), Barbara Anderson, Gloria Marchand
Second Row (L to R): DHHS Commissioner Nicholas Vailas, Zane Knoy, Dr. David Eastman, Dr. Mendon MacDonald (SCOA Chairman), Edward Amsden, Henry Anderson, Thomas Marchand.

EDWARD AMSDEN (Merrimack County): Ninety-five years young, he donates 100 hours per month to 26 agencies in Merrimack County, among them the NH Historical Society, where he is a docent, and two elementary schools, where he volunteers for the RSVP America Reads program. Ed also plays the organ and piano, and in his spare time, he entertains residents at nursing homes and assisted living facilities in Greater Concord.

JANET CONROY (Rockingham County): A board member of Rockingham Hospice from 1984-1990, Conroy cared for her dear friend Marian from the time she was diagnosed with cancer until Marian's death. Charter member of the Derry Village Rotary Club where she volunteers for many activities. Board member of the Marion Gerrish Community Center, where she also assists with the thrift shop. Also instrumental in bringing cable television programs to Derry.

DAVID EASTMAN, M.D. (Strafford County): He is known for his strong commitment to seeing that elderly and disabled persons receive quality health care, regardless of their ability to pay. Has volunteered for numerous organization, and has been a board member of The Homemakers of Strafford County for 17 years, helping that agency fulfill its mission. Active participant in and supporter of, The Senior Sports Classic. Although retired from his medical practice, he still attends two clinical continuing education lectures each week.

BERNICE "BUNNY" PERRY (Sullivan County): Outreach and referral supervisor at the The Newport Senior Center, she also spends much of her free time helping seniors. This includes anything from sympathetic listening to helping balance a checkbook to notarizing a living will. Instrumental in developing the Hoyt Community Care Center through the Newport Area Association of Churches. Also active in other community organizations in Newport.

Debate Continues on Medicare Prescription Drug Coverage

by Kim Hadank-Swinson

The debate continues in Congress on two bills, one proposed by the Senate, the other by the House, that would provide prescription drug coverage under Medicare.

The high cost of prescription drugs is a crucial problem for many Americans, especially those age 65 and older who live on fixed incomes. According to the September 2000 issue of *Governing Magazine*, one-third of the Medicare beneficiaries nationwide

(approximately 13,000,000 people) have no access to prescription drug coverage. In New Hampshire, approximately 56% (85,000) NH seniors have no prescription drug coverage. For many people, the choice comes down to paying for medications or for other daily essentials, such as food and fuel.

These Medicare prescription drug proposals continue to change and may still be modified significantly before a

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final prescription drug plan is approved and enacted. It is also possible that a compromise might not be reached and neither proposal will pass. The proposals at present are defined below.

Under both the Senate and House proposals, prescription drug coverage would be available under Medicare, but enrollment would be voluntary. The first stage of prescription drug coverage would begin in 2004, with prescription discount cards offered to enrollees, and more complete coverage would be instituted in 2006. A new federal agency would be created to administer the Medicare prescription drug benefit and the private plans that would offer coverage.

The estimated cost under either proposal would be the same: \$400 billion over a ten-year period. The premium under both bills would be \$35 per month. Significant resources would be allocated to help persons on limited incomes and to cover catastrophic situations.

In spite of these similarities, there are important differences in the Senate and House bills with regard to the benefit structure.

The Senate Medicare Drug Proposal* would do the following:

- ◆ Beginning in 2006, enable beneficiaries to choose either traditional Medicare benefits with a “prescription drug only” private plan, or Medicare Advantage, which includes private plans covering Medicare benefits and drug coverage. In rural regions of the country, where private plans offer no prescription drug coverage, the federal government would provide a fallback plan.

- ◆ The federal government will provide a \$600 annual subsidy for beneficiaries who have incomes under 135% of the Federal Poverty Level (currently this is defined as \$1,011 monthly income for one, and \$1,364 for a couple).

- ◆ Include a \$275 yearly deductible and a 50% copayment for beneficiaries whose annual prescription costs are between \$275 and \$4,500.

- ◆ Beneficiaries pay 100% when annual prescription costs are between \$4,500 and \$5,812 (this part of the proposal has come to be known as the “doughnut hole” due to the gap in coverage) and then 10% for costs above \$5,812.

- ◆ Individuals enrolled in Medicaid would not be eligible for the Medicare drug benefit under this proposal. **The House Medicare Proposal*** would do the following:

- ◆ Beginning in 2006, enable beneficiaries to choose from traditional Medicare benefits with a “prescription drug only” private plan, or Medicare Advantage, which includes private plans covering Medicare benefits and drug coverage.

- ◆ The federal government will provide an annual subsidy for beneficiaries who have incomes under 135% of the FPL. For those with incomes between 135% and 150% of the FPL, the subsidy would be based on a sliding fee scale. (Currently 150% of the FPL is defined as a monthly income of \$1,122 per individual and \$1,515 per couple.)

Commission To Study Financial Exploitation of Elderly and Disabled

by Margaret Morrill

A ceremony was held on July 11th in the Executive Council Chambers to commemorate the signing of HB 461, which establishes a commission to study financial exploitation of the elderly and persons with disabilities. The role of the new commission will be to study the causes, penalties and remedies of financial exploitation and the challenges and barriers facing the state in its efforts to protect victims and prosecute offenders.

Sponsors of HB 461 included Representatives Joseph Manning, Daniel Itse, and Peter Batula, and Senator Andre Martel.

The commission will include legislators, the Commissioner of the Department of Health and Human Services or his designee, the Director, Division of Elderly and Adult Services, the Attorney General or his designee, the administrative judge of the Probate Courts or designee, representatives from the Medicaid Fraud Control Unit, the banking industry, the NH Bar Association, a public guardianship agency, and local law enforcement.

National studies indicate that at least three to five million seniors are financially exploited every year. This is a conservative estimate, since elder abuse of all vari-



Commemorating the signing of HB 461. From Governor Benson's left: Carol Stamatakis, DEAS Legal Counsel, Cheryl Driscoll, NH Legal Assistance, Douglas McNutt, Acting DEAS Director, Rep. Peter Batula, Attorney General Peter Heed, Sen. Andre Martel, Rep. Daniel Itse, Violet Constant (SCOA, AARP), and AARP members Matt Gooby, Dick Anderson, Gerrie Porter, Dot Gooby, Ramona Brooks, and Joyce Fields.

eties is underreported. Frail elders are especially vulnerable to financial exploitation, and almost half of the victims nationwide are age 80 or older.

New Hampshire's Adult Protection Law requires the Division of Elderly and Adult Services to investigate reports of abuse, neglect, self-neglect or exploitation of incapacitated adults, including financial exploitation. The law defines exploitation as, “The illegal use of an incapacitated

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Thank you, Cassie Keane!

Earlier this summer, the Division of Elderly and Adult Services said farewell to Catherine (Cassie) Keane, who resigned from her position as DEAS Director on July 7, 2003.

Keane was appointed as DEAS Director in January 1998 following nearly ten years of experience in the NH Department of Health and Human Services. Prior to being appointed, she had served for three years as the Director of Client Services in what is now the Division of Family Assistance, and had also worked for several years before that as an attorney in the Office of Child Support, securing medical and financial support for children.

Under Keane's leadership, DEAS developed a vision and mission statement that emphasized consumer choice and direction. She was responsible for implementing Senate Bill 409, a key piece of legislation passed in 1998 that sought to reduce reliance on institu-

tional care. Under her leadership, DEAS established the ServiceLink Network, a statewide network of information and assistance centers for elders, adults with chronic illnesses and/or disabilities and their caregivers, and expanded the supports available under the Home and Community Based Care Program for the Elderly and Chronically III.

During her tenure at DEAS, Keane was also instrumental in developing rate increases for social services and helped develop legislation that strengthened the Adult Protection Law and consumer interests. Through her support of the State Committee on Aging and Area Committees on Aging, she also strengthened New Hampshire's senior citizen network. Dr. Mendon MacDonald, Chairman of the State Committee on Aging, had

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SCOA Spotlight

From Dr. Mendon MacDonald, SCOA Chairman

Both Irene Gavin, representing Sullivan County, and Suzanne Keller, representing southern Hillsborough County, have ended their terms on the State Committee on Aging, and Jack LaBonte, representing Strafford County will end his term shortly. On behalf of SCOA, I would like to thank them for all their hard work. Among other activities, Irene, Suzanne, and Jack served as members of the SCOA Communications Committee, which assists with the production of *Aging Issues*.

SCOA is an 18-member, governor-appointed committee that advocates for the needs of New Hampshire's senior citizens, and acts in an advisory capacity to the Division of Elderly and Adult Services. SCOA meets monthly, and focuses on legislation, long term care and other needs.

New candidates are now needed on SCOA to represent Sullivan, Strafford and southern Hillsborough Counties. If you or someone you know is interested in serving as a SCOA member, please contact me at **603-524-2515** or send an email to mmacd@alumni.unh.edu

- ◆ Beneficiaries will pay a \$250 yearly deductible and a 20% copayment for prescription costs between \$250 and \$2000. Beneficiaries would then pay 100% of annual prescription costs between \$2,000 and \$4,900. For prescription costs above \$4,900, full catastrophic coverage would be provided.

- ◆ For those with annual incomes above \$60,000, coverage for catastrophic prescription drug costs would be much more limited.

- ◆ For Medicare beneficiaries enrolled in Medicaid, the prescription drug coverage would be provided under Medicaid, subject to federal and state laws.

A Congressional conference committee is working to resolve the differences in the Senate and House bills. More information will be available at a later date. Persons wishing to obtain more information about the proposals may wish to contact their U.S. Senator or Representative.

**Information provided by The Kaiser Network, a nonprofit organization focusing on public policy, was used in this article. Web site: www.kff.org*

Prescription Assistance Programs

New Hampshire citizens who need help in paying for their medicines may wish to contact one of the following programs:

The New Hampshire Senior Prescription Drug Discount Program: Approximately 50 participating pharmacies provide discounts on both generic and brand name medications to NH residents age 65 and over who do not have any other prescription coverage. Telephone (toll-free): **1-888-580-8902**, web site: www.dhhs.state.nh.us/DHHS/DEAS. For mail order prescription service, call **1-800-628-0717**.

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From the DEAS Director's Desk

Dear Reader:

This is my first opportunity to write to you in my capacity as Acting Director of the Division of Elderly and Adult Services. As you know, or will read elsewhere in this issue, Cassie Keane left this position at the end of July and I have taken over for her on an interim basis.

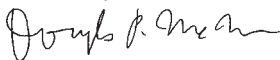
It will be difficult to replace Cassie's personal and professional commitment to the reform of the long-term care support system. I will personally miss her support as I move forward in this new role. Fortunately, Cassie has laid the groundwork for DEAS to continue developing the long-term care support system.

When Cassie last wrote to you, DEAS and the Department as a whole were in the process of providing information to the legislature regarding the budget. We were also working with county government and the nursing home industry on HB 663, which dealt with the sunseting of funding for long term care that was built into SB 409 when it passed five years ago. Under SB 409, the state and counties each paid 25% of the cost and the federal government paid 50% of the cost. This financing arrangement would have expired, or sunsetted, on June 30, 2003.

As passed, HB 663 continues the long term care funding for one more year, with a sunset provision or expiration date of June 30, 2004. In addition, HB 663 as passed provides for an assessment to be paid by nursing homes, which will hopefully be matched with additional federal funds in order to provide increased funding overall for nursing homes. DEAS has requested the federal government's approval for both the nursing home assessment and the Medicaid Quality Incentive Program, which upon approval, would be paid to all nursing homes that provide Medicaid care.

The budget that was passed will require some further belt tightening at DEAS. In future letters I will attempt to be more specific about these issues.

Sincerely,



Legislative Update

The following are some key bills that became law during the 2003 legislative session, including the continuing resolution on the state budget and other legislation of interest to seniors and adults with chronic illnesses or disabilities. More detailed information on these and other bills can be found on the state government web site at www.gencourt.state.nh.us

Budget/Long Term Care Costs

HJR 3 is the continuing resolution that adopts, on a temporary basis, the State budget that was vetoed by the Governor, and the provisions of HB 2-FN-A. The latter contains statutory revisions needed to support the budget. HJR 3 continues in effect until an operating budget is enacted, but in no event later than October 1, 2003.

HB 663 continues for one year the sharing between the state and counties of the non-federal portion of Medicaid long term care costs (*please see the letter from the DEAS Director included in this edition for further details on this important bill*).

Adult Protection

HB 461 establishes a commission to study financial exploitation of the elderly and persons with disabilities. This bill was originally filed at the request of DEAS. The commission will study financial exploitation, its causes, penalties and remedies, and the challenges and barriers facing the state in its efforts to protect victims and prosecute offenders. (A separate article on the commission is included in this edition of *Aging Issues*.)

HB 798 amends the laws governing durable powers of attorney for financial matters and guardianships in order to provide greater Probate Court oversight and control over the practice of guardians and agents making gifts out of the ward's or principal's funds. For all powers of attorney executed after 1/1/04, standard disclosures will be required to be signed by the agent and principal. These disclosures will explain the duties of the agent and the legal ramifications of the document. Clearer guidelines and standards are established in an effort to ensure that any gifting that is done does not have an adverse impact on the incapacitated person.

Consumer Protection

SB 34 defines independent living retirement communities and provides consumer protections. Entities covered in SB 34 will be required to disclose to consumers in a standard format, the services provided and the costs of services, as currently required for assisted living residences, and would require registration with the Attorney General's Office, Consumer Protection Bureau. *Effective 1/1/04.*

SB 98 prohibits telemarketers from contacting customers on a federal do-not-call registry. This bill requires telemarketers to comply with the Federal Trade Commission's Telemarketing Sales Rule for telemarketing sales calls made within the state. *Effective 9/16/03*

HB 601 amends the Long Term Care Insurance Act (RSA 415-D) based on the National Association of Insurance Commissioners model. This bill was a request of the Department of Insurance. The amendments provide additional consumer protections, define group long term care insurance, provide a 30-day "free look" for consumers and other safeguards. *Effective 8/23/03.*

2003 Conference on Aging Held

by Nicola Whitley

On May 22, the *New Hampshire Conference on Aging: Building Tomorrow Today* was held at the Courtyard Marriott in Concord.

The conference was sponsored by the Division of Elderly and Adult Services in conjunction with the State Committee on Aging. This year's theme was *Family and Friends, A Circle of Support*.

This is the third year of the conference and they had their best year yet, with over 300 attendees from across the aging issues spectrum, including consumers, policy makers, families and advocates, care providers, and community leaders. There were also 35 exhibitors in attendance.

Introductory remarks were given by DHHS Commissioner Nicholas Vailas and former DEAS Director Catherine Keane.

Keynote speakers included John Paul Marosy. Mr Marosy has authored books and articles on elder care and is president of Bringing Elder Care Home LLC (Worcester, MA), a consulting firm that helps business and community leaders create more caring, more productive workplaces. He is also a member of the board of directors of the National Family Caregivers Association.



SCOA member Ken Brooks shares information with conference attendees about the State Committee on Aging.

The concluding speaker was Linda Arnold, RN. Ms. Arnold spoke on helping people deal with stress and adversity by using laughter, and she had everyone rolling in the aisles! She is a psychiatric nurse and educator and a nationally known speaker.

Comments on the conference evaluation forms were very positive and many were glad for the chance to network with others in the field. One attendee wrote, "The conference was well organized and well run. Topics and speakers were super. In this political/financial environment, we can use this inspiration. Thanks!"

Planning has already begun for the 2004 Conference on Aging, and suggestions are welcome. Please call DEAS at **603-271-4680**.

Nicola Whitley is a Programs Information Officer for the NH Department of Health and Human Services.

Nursing Homes

SB 94 requires criminal background checks for employees working in long term care facilities and in home health care, for certain personal care services providers, and for applicants for a license from the board of nursing. The provisions of the bill also apply to any agency providing temporary or per diem staff to a residential care facility or home health agency. *Effective 7/1/03.*

HB 709, filed at the request of DEAS, creates authority for Probate Court receiverships of nursing facilities and other residential care facilities licensed under RSA 151 that would otherwise be facing closure and relocation of residents due to financial problems or serious deficiencies. This law would allow a Court-appointed receiver to temporarily operate a facility to prevent the need for sudden relocation of vulnerable residents. This bill would help prevent "transfer trauma" and the possibility of residents having to be moved to facilities that might not be their preference or might be far from their home communities. *Effective 1/1/04.*

This law is repealed on July 1, 2005, provided that the repeal shall not affect receiverships in effect on such date.

Tax Exemptions

SB 45 revises several statutory provisions pertaining to property tax exemptions, deferrals and credits for veterans, the elderly and disabled. A uniform enactment procedure for adopting or modifying property tax exemptions or credits in RSA 72 is provided in an effort to simplify the procedure at the local level.

HB 806 will enable municipalities to adopt a property tax exemption for deaf or severely hearing impaired persons. Persons requesting this exemption must meet the definition of deaf and severely hearing impaired as defined in the law. They must also have resided in NH for at least five consecutive years preceding April 1 in the year in which the exemption was claimed, and meet income and asset eligibility criteria. *Effective 4/1/03.*

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Send news items or other correspondence to NH DEAS, 129 Pleasant Street, Concord, NH 03301-3857, Attention: Margaret Morrill for *Aging Issues*, or email mmorrill@dhhs.state.nh.us

The Law and You

The following question and answer are provided courtesy of Laurel O'Connor, an attorney at the Senior Citizens Law Project, NH Legal Assistance.

Q: What is a power of attorney?

A: There are at least three different documents that people commonly refer to as a “power of attorney.” They accomplish three different things and are used for three different purposes. You should always know exactly what document you are referring to and review your document to be certain it serves the purpose you need.

First is a **Power of Attorney**. This is a common document that is most often used for a limited time and a specific purpose. For example, you may want a power of attorney which would allow your spouse, adult child, or other trustworthy individual to sign the paperwork necessary to buy or sell a home. Another example would be to have someone pay bills for you while you are away on an extended vacation.

This document is only good as long as a person (the principal) is competent to revoke it. Most people are looking for a document that will allow someone (an agent) to pay bills for an extended period of time when the principal is not competent, either physically or mentally, to do so. A power of attorney will not be valid when it is needed most, when someone is not competent to pay his or her own bills. For that, you need a durable power of attorney.

Second is a **Durable Power of Attorney**. The main difference between a power of attorney and a durable power of attorney is that a durable power of attorney is effective as long as the principal is living, even if he or she is no longer competent. For a power of attorney to be durable, it must contain a phrase that states: this power of attorney shall not be affected by the subsequent disability or incompetence of the principal (other similar language will be effective as well).

The powers given under a durable power of attorney are usually quite broad and can be tailored to meet the needs of the individual. Therefore, you should consult with an attorney to prepare this document so that it will meet your present and future needs. Both the power of attorney and the durable power of attorney are used to deal with financial matters. To appoint an agent to deal with medical matters, you need a durable power of attorney for health care.

Third is the **Durable Power of Attorney for Health Care**. This is one of two documents also known as Advance Directives. The other document is the Living Will. These two documents deal with **health care** issues only. They do NOT give an agent the authority to handle your financial affairs. Many people, having executed Advance Directives, incorrectly believe they have completed all the documents they need because they have a “power of attorney.” Unlike a power of attorney or durable power of attorney, a durable power of attorney for health care is *only* effective if the principal cannot make decisions regarding his or her health. As long as the principal is competent, he can make his or her own decisions regarding his health care.

Advance Directives are provided by most hospitals and health care facilities, as well as some senior centers. The forms are usually free and there are employees who are trained to answer questions about how to fill out the forms. If you have legal questions regarding the forms, you should consult your attorney.

It is important to note that in all instances, your agent should be carefully chosen. You are giving that person the ability to handle your finances. This has, on occasion, led to abuse by the agent. To learn more about how to have an agent account for his or her actions under a Power of Attorney or Durable Power of Attorney, contact the Senior Legal Advice Line at the numbers given below.

New Hampshire Legal Assistance operates the Senior Legal Advice Line, which is free and available to any NH resident who is age 60 or older. You can access the Advice Line from 9am-noon on Monday, Tuesday, Thursday and Friday, and from 1-4pm on Wednesday. Toll-free number: 1-888-353-9944 or in Manchester only, 603-624-6000. TTY: 1-800-634-8989.

New England Forum Planned for Family Caregivers

Mark your calendars for “Prepare To Care – Information to Action!”, the New England Family Caregiving Town Hall Meeting, scheduled for September 20 from 8:30-noon at the John F. Kennedy Library in Boston.

Spearheaded by the National Family Caregivers Association (NFCA), the meeting will provide a forum for family members to discuss with elected officials and business leaders the challenges that family members face when caring for persons with serious illnesses or disabilities. There will be a panel discussion moderated by Madge Kaplan, Senior Health Editor at WGBH Radio, and a question and answer session.

Gene Brown of the Region I office of the U.S. Administration on Aging, and Allita Paine of the NH Commission on Disabilities, will also be present to answer questions and distribute written materials about public programs available to assist family caregivers. A complimentary continental breakfast will be served.

The NH ServiceLink Network, including Rockingham County ServiceLink and other sites, is partnering with NCFA, WGBH radio, and other New England and national organizations to plan this event.

“ServiceLink supports this important Town Meeting because we understand the important role of the family caregiver and the challenges and sacrifices they face on a daily basis,” said Julie Stone, Rockingham County ServiceLink Co-Director.

The meeting is free and open to the public, and family caregivers can attend in person, log in from their home computers or participate on-line via the live, interactive web cast of the event (the web cast will be from 9:30-11:30 on September 20th). Information on web cast locations can be obtained by calling Service Link (toll-free) at **1-866-634-9412**.

For those who wish to attend the meeting or participate in the web cast, pre-registration is required by September 15 (see below).

Information on the panelists can be found on the NFCA web site at **www.nfcacares.org**.

To pre-register to attend the meeting or to participate on-line, call **1-800-493-9255** and ask for the Caregiver Town Hall Meeting Coordinator, or log onto the NFCA web site and click on Town Hall Meetings.

Debate *continued from page 2*

The Medication Bridge Program: This program is sponsored by The Foundation for Healthy Communities and assists patients in locating pharmaceutical companies that provide free, brand-name, long term medication at little or no cost. This is done in conjunction with the patient’s physician. Call **225-0900** or log on to **www.healthynh.com**

Emergency Assistance: Emergency assistance to cover medication costs may be available from the welfare departments in some NH cities and towns.

NH Medicaid: Persons eligible for state medical assistance (Medicaid) may obtain assistance in paying for prescription drugs and other medi-

cal services. To apply for Medicaid, contact your local District Office (see the Aging Issues directory page). Medicaid information can also be found on the NH DHHS web site at **www.dhhs.state.nh.us/DHHS/MEDICAIDPROGRAM**

Veterans Health Benefits: Veterans wishing to obtain more information about prescription drug coverage can call (toll-free): **1-800-892-8384, Ext. 6073 or 603-624-4366, Ext. 6073. VA web site: www.vision1.med.va.gov.** Additional contact: TRICARE (for military retirees). Toll-free number is **1-877-363-6337**.

Kim Hadank-Swinson is a Program Planner at DEAS specializing in prescription drug issues.

Senior Moments on The Road!

by Joanne Dodge

For those of you who haven’t heard me bragging (could there be anyone out there who hasn’t?), *Senior Moments* is a senior theater group sponsored by the Seacoast Repertory Theater in Portsmouth. We meet every Thursday, from late September until late May, when we put on a play written by the members. In past years, we spent the summer doing summer things, while waiting impatiently for the next season to begin.

Well, this summer we didn’t stop working. We’ve been getting ready for the performances we’ll be giving throughout NH between September 3 and October 15. The play is called *Help! I’m Falling and I Can’t Get Up!*, and focuses on reducing the risk of falls among older persons. Performances are scheduled as follows:

- ◆ Exeter Senior Center – Wednesday, September 3, 2003, 1:30
- ◆ Littleton Senior Center – Tuesday, September 9, 2003, 1:00
- ◆ Frisbie Conference Center, Rochester – Tuesday, September 16, 2003, 3:00
- ◆ Laconia Senior Center, Laconia – Thursday, September 18th, 2003, 1:30
- ◆ Upper Valley Senior Center Lebanon – Thursday, September 25, 2003, 12:30
- ◆ Cheshire Medical Center, Keene – Tuesday, September 30, 2003, 3:00
- ◆ Salem Senior Citizen Center – Wednesday, October 1, 2003, 1:00
- ◆ Elliott Hospital, Manchester – Tuesday, October 7, 2003, 1:00

- ◆ T.R.I.P. Center, Franklin – Wednesday, October 8, 2003 1:30
- ◆ Pleasant View Retirement Center, Concord – Monday, October 13, 2003, 1:00
- ◆ Seacoast Repertory Theatre, Portsmouth – Wednesday, October 15th, 2003, 1:00.

Senior Moments is able to do these performances through collaboration with the NH Falls Risk Reduction Task Force (DHHS Injury Prevention Program), and with the support of grants from the NH Charitable Foundation and the NH Council on the Arts. I also want to thank the following for their in-kind support: Northern Bus Sales, Inc., of Hudson (van transportation), Seacoast Orthopedics and Sports

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With A Little Help Keeping Your Caregiving Balance

by Dennis R. Hett

You can probably name at least one. In all likelihood, you know a caregiver – a person who helps an older spouse, relative, friend or neighbor, enabling that person to stay in his or her own home – and who does it without pay.

You yourself may be a caregiver.

No one plans to become a caregiver, no one trains to become a caregiver. You begin because someone you love or know needs help.

Caregiving can involve running errands and tending to minor house-keeping tasks, and helping out now and then. If the person you help has many needs, caregiving can turn into a 24-hour-a-day job every bit as intensive and demanding as working in a nursing home.

The work can be just as fulfilling as it is difficult and stressful. And caregiving can endanger your health and well-being when you ignore your own needs. Family members who become caregivers often feel that they can and should be able to “do it all.” This attitude can lead to trouble.

This leads us to the First Rule of Balance for Caregivers: **You need a team to support your efforts.**

It’s your job as a caregiver to piece together a team to support you and the person you care for. Where do you begin?

Call ServiceLink, New Hampshire’s free information and supported referral service for seniors, adults with disabilities and their families! ServiceLink will connect you with the resources and services available in your community.

You can call ServiceLink toll-free at (866) 634-9412 or access their web site at www.servicelink.org

You might want to investigate Visiting Nurse Services, Home Health Aides and Adult Day Care.

Caregivers who try to “do it all” sometimes injure themselves by attempting to lift the persons they care for without taking proper precautions or using the right equipment.

This leads us to the Second Rule of Balance in Caregiving: **You need training and proper equipment in order to deliver good care for as long as you can.** Ask ServiceLink for advice about training and home modifications.

You can also get in touch with the National Family Caregivers Association. They offer helpful guides and advice. Membership for caregivers in the U.S. is free. Call toll-free: (800) 896-3650, or through the Internet: www.nfcares.org.

You’ll find more help in the **Caregiver Resource Room** on the U. S. Administration on Aging website, www.aoa.gov/prof/aoaprof/caregiver/caregiver.asp.

If caregiving has begun to consume more and more of your time, you begin to realize that you need time off too. This leads us to the Third Rule of Balance for Caregivers: **You and the person you care for will do better if you “have a life” outside of caregiving.**

Be sure to seek out a caregiver support group- people with similar experiences who will understand and be willing to share their caregiving knowledge. Ask ServiceLink staff about available respite grants that could enable you to pay another person to substitute for you as you attend to personal business.

As you get your own life in order, be sure to go for your own regular health checkups. It’s part of taking care of yourself!

You may also wish to put this reminder on your refrigerator door: **I will care for myself as I have cared for others.**

Dennis Hett served a total of 25 years as CEO of three organizations representing not-for-profit homes and services for the aging in Massachusetts, New Jersey and the northern New England states. Dennis is co-chair of the Manchester Regional Area Committee on Aging and a member of the Long Term Supports Committee of the State Committee on Aging.

New Preventive Health Checklists Available

Do you and your family feel inundated with information about prevention and medical screening tests? From mammograms to prostate cancer screenings to cholesterol and blood pressure tests, it can be confusing to figure out which tests are needed and when. Help is available from two new checklists issued by the U.S. Preventive Services Task Force, Agency for Healthcare Research and Quality: **“Women: Stay Healthy at Any Age: Checklist for Your Next Checkup”** and **“Men: Stay Healthy at Any Age: Checklist for Your Next Checkup”**. The pamphlets also include information about how to stay healthy and allow people to record which screening tests they’ve received, when, and how they should be tested again.

The womens’ checklist can be viewed and downloaded at www.ahrq.gov/ppip/healthywom.htm (English version) and at www.ahrq.gov/ppip/healthywomsp.htm (Spanish version).

The mens’ checklist can be viewed and downloaded at www.ahrq.gov/ppip/healthymen.htm in English and at www.ahrq.gov/ppip/healthymensp.htm in Spanish.

These materials are based on research from the U.S. Department of Health and Human Services, and the U.S. Preventive Services Task Force, the leading independent panel of private-sector experts in prevention and primary care. The Task Force conducts rigorous scientific assessments of the effectiveness of a broad range of clinical preventive services.

Senior Moments *continued from page 4*

Medicine of Somersworth, NH (casts and equipment) and NE Emergency Support Systems (for the use of an emergency medical response button).

Later on this fall, *Senior Moments* will also be giving short acts and readings for seniors, schools, civic groups and other organizations in the Seacoast region. Funding is being provided by United Way of the Greater Seacoast and the Greater Piscataqua Community Foundation. The purpose of this project is to promote the benefits of alternative programs for seniors in the community who want to participate in creative activities.

Senior Moments hopes to encourage a more positive attitude toward aging, because older people have a lot to contribute. We want to share some of the joy and laughter we’ve found. We want to let everyone know that seniors have the right to choices and opportunities, and that living and enjoying and participating in life doesn’t end at age 60 or 70 or 80 or 90.

We also hope that some of you out there will join us – no acting experience necessary! If you’re interested, please contact me as described below. As always, thanks to all those who have faith in what we want to do and who have given us the resources to make it happen.

For more information about Senior Moments, you can call Joanne Dodge at 749-2084 or email joannedodge@comcast.net. For more information about the NH DHHS Injury Prevention Program, call Rhonda Siegel at 1-800-852-3345, Ext. 4700 or email rsiegel@dhhs.state.nh.us

It’s Never Too Late To Tap Your Creativity

by Martha Bauman

Note: This column originally appeared in the *Keene Sentinel*.

These are the creative years, says gerontologist Gene Cohen in his book, *The Creative Age: Awakening Human Potential in the Second Half of Life*.

Who, me? I can’t draw a straight line with a ruler. The last sweater I knit would have fit Godzilla. You probably have your own disclaimers: “The plants in my garden look like yard sale rejects.” “The last time I baked a cake, the ducks at Robin Hood Pond spit out the crumbs.” “I flunked out of the senior center watercolor class.”

And yet, Dr. Cohen has plenty of examples to back up his point. Anthropologist Mary Leakey, Michelangelo, Sigmund Freud, Agatha Christie and many others achieved much of their finest work after age 65. Laura Ingalls Wilder was 68 when she wrote *Little House on the Prairie*. Anna Maria Smith was in her 70’s when she developed the Granny Smith apple. George Abbot wrote “Damn Yankees” at age 68 and “Frankie” at age 101. The most influential leaders of the world have, for the most part, been people in their mature years.

Well, yes, you may be thinking, but these people were already well established. Developing that kind of talent during the golden years is unlikely. But Cohen isn’t talking about fame and fortune, though he believes it is more likely than we think. He is talking about both Creativity (big C) and creativity (little c), the potential of daily life. Creativity is not limited to art and music. It includes such things as solving personal problems or bringing about reconciliation in a family. Bringing something new into your life is a creative act, whether it’s an idea, a way of living, a recipe, an intellectual pursuit, a new friend or a newly painted chair. Daily we create our lives.

Cohen goes beyond demonstrating that creativity can be experienced in late life. *He states that aging actually promotes creativity.* He describes four phases of human development in the second half of life. **The revaluation phase** typically begins in the late forties and lasts for several

years. One becomes aware of time limits and begins to evaluate how one wants to spend the remaining years. Such a person may or may not make dramatic changes, but is thinking about the future.

Next comes the **liberation phase**, in which a person begins to let go of some of the constraints that were needed during the career building of earlier years. At this stage many people feel confident enough to leave a well paying job to fulfill a long held dream or begin a ‘retirement career’. Others turn to long deferred interests in the arts. Some decide to put their skills into service for civic or religious organizations. (I know one retired banker who serves on 12 boards. His wife suggests that this is not liberation.)

The **summing up phase** comes next, usually when people are in their 70’s, and continues for many years. People can look at what they have done with more objectivity. They become more selective about what they want to be involved with. They may decide to see more of the world or otherwise round out their experiences. There is the desire to ‘do it while I’m still able’ but that is not the only motivation. There is also the wish to express new aspects of one’s self. The sense of passing on the history and culture may be strong. It is at this age that many people write family histories or organize photo albums and seek out old friends. This summing up is a creative endeavor and calls for thinking in a new, more circular way. We circle back, review and move on. The skill is useful in public life and may explain why delicate negotiations are often conducted by older people.

Cohen calls the final stage, which includes people in their 80’s and beyond, the **encore phase**. Creative expression is shaped by a desire to make a lasting contribution to family or community, to take care of unfinished business and to celebrate one’s contributions. One thinks of Jimmy Carter and his late life work, but there are less well known examples taking place in

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Creativity continued from page 5

almost every community. The accumulated mass of experience is one factor in creative work in late life. “We’ve been around the block”, we say. We have knowledge and inner life experience as well. We are free, generally, from supporting our families. No wonder the second half of life has such potential for creativity!

Of course there are losses during this time as well. Some elders cope with loss through creative endeavors. Matisse created his marvelous cut-out artistry from a wheelchair. William Carlos Williams, unable to practice medicine after a stroke in his sixties, was severely depressed. Healing came as he wrote the poetry that was published when he was 79. Grandma Moses took up needlework after the death of her husband. When arthritis brought that to a halt, she began painting. Creativity is good therapy.

Cohen found an interesting response among older people to suggestions of specific creative endeavors. It was “Oh, I could never do that”, followed by doing it. It seems that we lack confidence, but have the courage to try anyway. Creativity often leads to better health, according to Cohen. Creating something brings a sense of mastery that actually triggers chemical changes in the body to enhance one’s immune system.

Is there a craft you have wanted to try? A subject you would like to know more about? A problem you’d like to help solve? Chances are you can do it. It’s only too late if you don’t start now.

Martha Bauman writes frequently for the column “Wit and Wisdom”, which appears in The Keene Sentinel as a public service of The Monadnock Senior Advocates. She is also a 2003 Vaughan Award winner (see page one of Aging Issues).

Hillsborough County NF Hosts Motorcycle Show

by Bob Montgomery

Things revved up on July 13 at the Hillsborough County Nursing Home and Rehabilitation Center in Goffstown, which hosted its fifth annual motorcycle show on that date.

Fifty-five riders from clubs throughout New England vied for trophies for the best American, European and Asian bikes, best restoration and other categories. The judging was done by residents, many of them former riders, who also enjoyed going from one motorcycle to the next, comparing them to machines they had ridden in their younger days.

The show started in 1998 when former resident Rex Simpson, a rider since his teens and once a member of four motorcycle clubs, suggested the idea to staff at the facility. The show has been named in his memory.

Help in transporting residents was provided by volunteers. Entertainment was provided by two musical acts, vocalist Toni Troy, who sang several of her own compositions, including a special song she wrote for the occasion, and the Paul Bordeleau Trio, including Paul and Jan Bordeleau on keyboards, and vocalist Theresa Simard.

Said Maureen Campbell, a former motorcyclist and member of the HCNH & RC activities staff who directs the show every year: “I think the great success of our show is due to the fact that it brings back so many good memories for the residents who watch what’s going on.”

Bob Montgomery writes the column “View From The Hill” for Neighborhood News Publications, and is a member of the State Committee on Aging.



Vocalist Toni Troy and a resident of the Hillsborough County Nursing Home and Rehabilitation Center tour the motorcycles on display at the July 13 show.

Thank You continued from page 2

this to say: “Cassie Keane was a wonderful person to work with. She understood thoroughly the systems in place, and the missing systems needed to assist the frail elderly in maintaining a sense of dignity, control and direction for their lives. She understood the lobbying efforts of components of the system, which are more interested in their own piece of the action than working together as a whole. She understood the political will which was more concerned with upsetting taxpayers than with meeting human needs.”

“She recognized that what we need is leadership that will help all citizens understand that money spent well on the needs of the state is money well spent. May we be blessed with a successor of similar quality.”

Effective July 10th, 2003, DHHS Commissioner Nicholas Vailas named Douglas McNutt to serve as DEAS Director on an interim basis. An attorney, McNutt’s past experience includes administration of a senior citizens law project in Minnesota. In 1992, he began working for DHHS and pro-

RISE Program Offers Many Choices

by Margaret Whitney

If you’re 55 years of age or older and enjoy learning, then the RISE Program is for you.

RISE (Rivier Institute of Senior Education) is an affiliate of the Elderhostel Network and is located on the Rivier College campus in Nashua. On August 13, RISE held an open house to introduce the more than 40 courses being offered during the Fall semester. This fall marks the sixth year of the award-winning program, which now has over 250 participants.

The RISE Program slogan is, “Where curiosity never retires” and in that spirit, courses are offered on a wide variety of subjects, including history, computer skills, art, religion, exercise, writing, movies, books, science, nature, life skills, elder safety, music, antiques, politics, government, cooking and nutrition.

Courses are non-credit, there are no tests, and no homework is required! Learning takes place in a relaxed environment, and you can enjoy the social amenities of studying with others who have a broad range of life experiences to share.

There are also a number of special interest groups, including bridge, knitting, quilting, computer club, dine-around clubs, a book club, a writer’s group, and a community outreach group. The knitting club has provided nearly 300 afghans to area agencies, hospitals and group homes.

Members enjoy all the benefits of the Rivier College campus, including free parking, use of the fitness center, dining hall and library, and participation in college activities.

The ten-week Fall semester is divided into two five-week terms, September 8 - October 10 and October 20 - November 21. Registration for all classes remains open on a space-available basis.

To learn more about RISE, or to register for classes, call the RISE office at 603-897-8623, or visit our web site: www.rivier.edu/departments/rise.

Margaret Whitney is a staff member at the RISE Program.

Study Commission continued from page 2

tated adult’s person or property for another person’s property or advantage, or the breach of a fiduciary relationship through the use of a person or a person’s property for any purpose not in the proper and lawful execution of a trust, including, but not limited to, situations where a person obtains money, property or services from an incapacitated adult through the use of undue influence, harassment, duress, deception or fraud.”

Over the last three years, reports of financial exploitation have been on the increase in New Hampshire and are probably the most difficult to investigate, according to Carol Stamatakis, DEAS Legal Counsel.

“Many of the cases we see involve power of attorney abuse,” said Attorney Stamatakis, in testimony provided to the legislature this spring. “Very often, by the time financial exploitation has been determined, the victim’s assets have been depleted, and it is rare that assets can be recovered.”

Investigating financial exploitation is costly, and police departments are sometimes frustrated in their efforts to obtain financial records or other documentation. Time is on the side of the perpetrator, since assets may continue to be depleted, lost assets are rarely recovered, and the longer the investigation continues, the more likely it is that the alleged victim will become impaired or die before anything is resolved.

Stamatakis also said that victims of financial exploitation are often reluctant to admit that they have been victimized, for fear that others will think them incompetent, and they will lose the right to manage their own affairs. Another problem is the scarcity of services for those who need help managing financial affairs. Some victims may know that they are being financially exploited, but choose to stay with their situations because they need help and don’t know where else to turn.

“This is a hidden problem,” said Representative Joseph Manning, in reference to financial exploitation. “A lot of people are getting hurt and are too ashamed to say anything. The Commission will help solve the problem.”

Issues to be examined by the Commission will include:

- ◆ The legal and ethical issues involving people with diminished capacity and the role of the probate courts;
- ◆ The services and supports available to victims and people at risk of becoming victims;
- ◆ Exploitation through the use of power of attorney;
- ◆ The role of financial institutions in recognizing and reporting suspected exploitation;
- ◆ Challenges facing law enforcement agencies;
- ◆ Scams affecting the elderly;
- ◆ The impact of all these issues on an aging population; and
- ◆ Penalties and remedies.

The commission will report its findings to the legislature in November 2004.

vided legal and policy consultation for several DHHS programs. He has also worked in several areas of DEAS. Commenting upon McNutt’s appointment before she left DEAS, Catherine Keane said, “Doug is extremely knowledgeable about the DEAS business, having worked many years ago in

the Office of Ombudsman, and in the recent past as the administrator of the Office of Community Services and the Medicaid Administrator in DEAS. I have relied on Doug’s knowledge and insight during my tenure as Director and have full confidence in his judgment and abilities.”

Fall Calendar

State Committee on Aging Meetings

For information, call Peggy Knight at DEAS (1-800-351-1888, Ext. 0549).

Area Committees on Aging

Meeting schedules and locations are subject to change. For more information, call the ACOA Chairperson listed on the directory page of *Aging Issues*.

Belknap – Third Tuesday of each month at 1pm, at varying locations

Carroll – Second Wednesday of each month at 1pm, at the Tri County CAP Resource Center, Route 16, Tamworth, NH

Cheshire (Monadnock Senior Advocates, covering Cheshire County and western Hillsborough County) – Third Wednesday of each month at 9am, at varying locations

Coos – Second Tuesday of every even-numbered month (February, April, June, etc.) at 10 am, in varying locations.

Grafton – Fourth Monday of each month, at 9:30 am, at the Plymouth Regional Senior Center

Greater Manchester – Third Thursday of each month, at 1:30 pm, at varying locations.

Greater Nashua – Last Wednesday of each month, at 1:30pm, at the Senior Activity Center on Temple St. in Nashua.

Merrimack – Third Tuesday of each month, at 10:30 am, at varying locations.

Rockingham – Second Tuesday of each month, at 10am, at varying locations.

Strafford – Second Thursday of each month at noon at either The Wentworth Home in Dover or the VNA in Rochester.

Sullivan (Sullivan/Kearsage Senior Advocates, covering Sullivan County and northwestern Merrimack County) – Second Tuesday of each month, at 9:30 am, at varying locations.

North Country Senior Action (Tri-County area, covering Coos, Carroll, and Grafton Counties) – Fourth Friday of each month, at 9:30 am, at varying locations.

Support Groups

Self-Help for the Hearing-Impaired (SHHH) will meet on **September 3, from 6:45-9:00pm**, at Prime Time, 195 McGregor St, Manchester. Guest speaker: Cheryl Killam, Accessibility Specialist and a member of the Governor’s Commission on Disability from 1983-2002. Topic will be **“Breaking Down Attitudinal Barriers Begins With You”**, focusing on communications issues and an overview of the Americans With Disabilities Act and accessibility guidelines.

The Alzheimer’s Dementia and Support Group for Caregivers sponsored by St. Joseph’s Hospital in Nashua, will have a special meeting on **September 9, from 4-6pm**, where Dr. Michael McGee, Medical Director of the Senior Adult Mental Health Unit, will answer questions about Alzheimer’s Disease. *Free*. The group will resume its regular meeting schedule in October, on **2nd Tuesdays, from 6-7:30pm**, at the hospital. For more information, call Lori Dodge at **882-3000**.

Courses

“Strong Living and Strength Training”, a 12-week strength and balance exercise program, will be offered at The White Birch Community Center in Henniker on Tuesdays and Fridays, from 10-11am, beginning **September 2**. Uses safe and effective low-impact exercise routines to increase bone density and improve the quality of life for seniors. Call Marty Davis at **428-7860** for more information.

Agile Up! is sponsored by Belknap-Merrimack Community Action Programs, Horseshoe Pond Place, and the Racquet Club of Concord. Designed to improve muscle strength, balance, and flexibility. Meets Tuesdays and Thursdays at Horseshoe Pond Place in Concord from 9-10am, for 6 weeks, beginning **September 16**. Cost: \$25 for six weeks. Open to the community. Orientation will be held on **September 4, 9-10am**.at Horseshoe Pond Place. Call **228-6956** now to reserve.

Special Events

North Country Senior Action’s Annual Meeting will be held on **September 15** at The Beacon Resort, Route 3, Lincoln, NH. Registration and continental breakfast from 8:30-9:45am, business meeting and program begin at 10:00am followed by luncheon, musical entertainment by the Blake Mountain Band and 50/50 raffle. Guest speaker: Judith Jones, Director of the Senior Citizen’s Law Project. Community Service Awards to be presented by Governor’s Councilor Raymond Burton. Cost: \$21.00 per person. For more information, call **444-8000**.

Crotched Mt. First Annual Brain Injury Awareness Day will be held on September 14 at Crotched Mt. Rehabilitation Center, Greenfield, NH. Barbecue and other special events, including the Certified 5K Run and Fun Walk (individual participants and teams encouraged to seek sponsors, proceeds will benefit adults recovering from brain injuries at the Center). For more information, call Steve McDermott at **547-3311, Ext. 528**.

Volunteers

AARP is looking for volunteers at its Information Center, located at 118 North Main St. in Concord. The center provides information on AARP programs, services and issues important to older NH residents. Tasks would include greeting guests, answering phones, and providing information to visitors. Training provided. For more information, call Ramona Brooks at 226-5830.

Festivals

28th Annual NH Highland Games, at the fairgrounds in Hopkinton, **September 19-21**. You don’t have to have Scottish blood in your veins to enjoy the rich heritage and culture of Scotland. Call **800-358-7268** for tickets and information.

NH Vintage Race Boat Regatta, Wolfeboro Bay Town Docks, **September 26-28, 9am-4pm both days**. Free. Call **569-4554** for more information.

Apple Harvest Day, downtown Dover, **October 4**. Food, entertainment and a display of crafts by more than 100 NE artisans. Free. Call **742-6769** for more information.

Sandwich Fair, Sandwich, October 11-October 13, 8am-dusk each day. Traditional country fair. Tickets: \$4 for persons age 60 and older. Call **284-7062** for more information.

The New Hampshire ServiceLink Network

1-866-634-9412

www.ServiceLink.org

Belknap County ServiceLink

The HealthLink Building,
575 Main St., P.O. Box 1327
Laconia, NH, 03247-1327
Local Line: 528-6945
Lisa Morris, Director

Carroll County ServiceLink

448 White Mountain Highway,
P.O. Box 420
Chocorua, NH 03817
Local Line: 539-7203
Susan Deyoe, Director

Coos County ServiceLink

Berlin Senior Center
610 Sullivan St., Suite 6
Berlin, NH 03570
Local Line: 752-6407
Janice Gingras, Director

Grafton County ServiceLink

Center for Elder Services,
10 Campbell St., P.O. Box 433
Lebanon, NH 03766
Local Line: 448-1835
Co-Directors: Dana Michalovic,
Karen Whitaker

Littleton Area Senior Center,
38 Cottage St., PO Box 98
Littleton, NH 03561
Local Line: 444-4498
Contact person: Virginia Loring

Hillsborough County ServiceLink

Manchester
Easter Seals NH,
555 Auburn St.
Manchester, NH 03103
Local Line: 644-2240
Yvonne Schulze, Director

Nashua
Community Council of Nashua,
7 Prospect St.
Nashua, NH 03060-3990
Local Line: 598-4709

Merrimack County ServiceLink

2 Industrial Park Drive
PO Box 1016
Concord, NH 03302-1016
Local Line: 228-6625
Beth Benson, Director

Monadnock ServiceLink

103 Roxbury St.,
Suite 302B,
Keene, NH 03431
Local Line: 357-1922
Melinda Feola Mahar, Director

Rockingham County ServiceLink

Seacoast
30 Maplewood Ave.,
Suite 212
Portsmouth, NH 03801
Local Line: 334-6594
Julie Stone, Seacoast Director

Derry
The Nutfield Building,
Suite 104,
44 Birch Street
Derry, NH 03038
Local Line: 432-1499
Connie Young, Derry Director

Strafford County ServiceLink

1 Wakefield St.,
Suite 306,
Rochester, NH 03867
Local Line: 332-7398
Becky May, Director

Sullivan County ServiceLink

96 Main St.,
PO Box 1338
Claremont, NH 03743
Local Line: 542-5177
Gail Merrill, Director



Guide to Services

Division of Elderly and Adult Services (DEAS)

The NH Division of Elderly and Adult Services is a state agency providing services and programs to adults aged 60 and over, and to adults between 18 and 60 years of age who have chronic illness or disability.

Acting Director:	Douglas P. McNutt
Central Office:	129 Pleasant Street, Brown Bulding Concord, New Hampshire 03301-3857
Toll Free Phone:	800-351-1888
TDDY:	800-735-2964
DHHS Internet:	www.dhhs.state.nh.us
District Offices:	For telephone numbers, see “Important New Hampshire Phone Numbers” below.

Information on DEAS Services and Programs:

Contact the District Office nearest your home (phone numbers are listed below). If you cannot reach the District Office, call **800-351-1888**.

NH ServiceLink Network: 866-634-9412

Adult Protection: To report suspected abuse, neglect, exploitation or self-neglect regarding an elderly or incapacitated adult, call the District Office nearest your home (phone numbers are listed below). If you cannot reach the District Office, call **800-351-1888, Ext. 4384**.

Alzheimer’s Program (Information, Respite Care):

Call 800-351-1888 ext. 4687.

Senior Prescription Drug Discount Program

(For persons age 65 and older): Call 888-580-8902.

Long-Term Care Ombudsman: Call 800-442-5640.

Important New Hampshire Phone Numbers

DEAS District Offices			
Berlin	800-972-6111 603-752-7800	Littleton	800-552-8959 603-444-6786
Claremont	800-982-1001 603-542-9544	Manchester	800-852-7493 603-668-2330
Concord	800-322-9191 603-271-3610	Nashua	800-852-0632 603-883-7726
Conway	800-552-4628 603-447-3841	Portsmouth	800-821-0326 603-433-8318
Keene	800-624-9700 603-357-3510	Rochester	800-862-5300 603-332-9120
Laconia	800-322-2121 603-524-4485	Salem	800-852-7492 603-893-9763

Area Committees on Aging

BELKNAP COUNTY

Mary Frost
101 Old Lake Shore Road
Gilford 03249
524-2974

CARROLL COUNTY

Dorothy Solomon
Box 993
Albany 03878
447-1199

CHESHIRE COUNTY

Martha Bauman
305 Roxbury St., Keene 03431
352-8725

COOS COUNTY

Suzanne Kearns, Co-Chair
North Country Elderly Programs
31 Pleasant St., Berlin 03570
752-3010

Dona Larsen, Co-Chair
NH Legal Assistance
256 Main St., Berlin 03570
752-1100

GRAFTON COUNTY

Elaine Vieira
258 Highland St.
Plymouth 03264
536-2232

HILLSBOROUGH COUNTY

(Greater Manchester)
Dennis Hett, Co-Chair
345 Edward J Roy Drive
Manchester 03102
626-3479

Helen Zarnowski, Co-Chair
14 Swan Ave., Bedford 03110
622-8405

HILLSBOROUGH COUNTY

(Greater Nashua)
Kay Noel
49 Lund St.
Nashua 03060-4441
882-5502

MERRIMACK COUNTY

Jacqelyne Jennings, Co-Chair
10 Ordway Ln., Bow 03304
224-1710

John Hoar, Co-Chair
82 Centre St., Concord 03301
228-8340

ROCKINGHAM COUNTY

Robert Forsing
12 Green St., Raymond 03077
895-9451

STRAFFORD COUNTY

Becky May, Co-Chair
Strafford Network-ServiceLink
1 Wakefield St., Suite 212
Rochester 03867
740-9594

Darlene Smith
The Wentworth Group
795 Central Ave., Dover 03820
742-7406

SULLIVAN COUNTY

Theresa LaPointe, Co-Chair
7 Bank Ave., Claremont 03743
542-6418

Amy Patnaude, Co-Chair
4 Roseland Rd., Newport 03773
863-3070

NO. COUNTY SR. ACTION

Dona Larsen
NH Legal Assistance
256 Main St., Berlin 03570
752-1100

Consumer Supplemental Food Program	800-942-4321
Consumer Protection for Public Utilities	800-852-3793
Consumer Protection for Insurance	800-352-3416
Eldercare Locator	800-677-1116
Food Stamp Information	800-852-3345
Foster Grandparent Program	800-536-1193
Fuel Assistance Information	603-271-8317
Governor’s Citizens Service	800-852-3456
HICEAS (Health Insurance Counseling, Education Assistance)	800-852-3388
Legal Services Advice Line 888-353-9944 or TTY: 800-634-8989 (for Manchester residents only)	603-624-6000
Living Will Information	603-225-0900
Medicaid Information	800-852-3345
Medicare Claims Information	800-447-1142
Part A: 800-522-8323, Part B: 800-447-1142	
Quality of Care:	800-772-0151

New Hampshire Help Line	800-852-3388
NH ServiceLink Network	866-634-9412
Senior Companion Program	800-856-5525
Social Security Administration	800-772-1213
Veterans Council	800-622-9230 or 603-624-9230

State Committee on Aging

Hon. Peter Batula

12 Paige Drive
Merrimack 03054-2837
424-6091

Kenneth Brooks

49 Technology Drive,
Apt. #57
Bedford 03110
647-4240

Hon. Robert Chabot

73 Joseph St.
Manchester 03102
625-5617

Barclay Chase

40 Barker Street
Keene 03431
352-4152

Violet Constant

28 Portsmouth Street
Concord 03301
225-5443

Darwin Farber

12 Meadowood Drive
Exeter 03833
772-4341

Robert Forsing

12 Green Road
Raymond 03077
895-9451

Albert “Jack” LaBonte

608 Tri-City Road
Somersworth 03878
750-5110

Dr. Mendon MacDonald

(Chairman)
73 Schoolhouse Hill Road
Gilford 03246
524-2515

Margaret “Marge” McClellan

1156 West Milan Road
Milan 03588
449-2014

Dr. Joseph Miller

13 Burnham Avenue
Durham 03824
868-1689

Robert Montgomery

24 Mountain Road, 3C
Goffstown 03045
497-3992

Susan Presby

83 Elm Street
Littleton 03561
444-0335

Ellen Sheridan

9 Fiskill Farm
Concord 03301
224-7612

Dorothy Solomon

Box 993
Albany 03818
447-1199

Aging Issues

A publication for New Hampshire's older citizens

Volume 7 Issue 4

Winter 2004

Veterans Find Their Voices In "Stories From Silence"

by Kristin Proulx, staff writer, Concord Monitor *

In 1940, the rural farming community of Goshen, New Hampshire numbered 342 citizens. The town would send 45 men and one woman to the Second World War.

They came from all walks of life and entered every branch in the military. Some enlisted and some were inducted. A fortunate few had gone to college, some were high school graduates and a few lied about their age in order to enlist. Nine sets of siblings served, including a brother and sister.

In *Witness To War: Stories from Silence*, a film by Deborah Scranton van Paassen, these brave men and women share their experiences, which are both personal and universal. Told

in crisp detail by the men and women themselves, the tales illuminate powerful, private experiences and history-making events all at once.

William 'Billy' Harold Sr., a machine gunner in the 168th Regiment, 34th Infantry Division, lost his entire squad at the notorious battle of Monte Cassino, Italy. He also participated in the brutal 1944 Anzio Campaign, where again he lost his entire squad. Childhood best friend, Clyde Childs, was one Division over from him the whole way.

Donald Hurd, a weapons specialist in the 95th Infantry Division, fought for 100 days without rest before his infantry unit won the fortified French city of Metz. The soldiers were dubbed the 'Bravest of the Brave' by war journalists, and the 'Iron Men of Metz' by the Germans.

Robert 'Bob' Jennison in the 3rd Armored Division hit a minefield in Germany as his unit was advancing. Wounded, he spent months recuperating in several military hospitals before returning to American soil.

One by one, all but one of the 46 soldiers, sailors, and codebreakers came home, found jobs, planned weddings and had children. A few years after they came home, their names were added, in bronze, to a tall gray memorial stone planted outside the Olive G. Pettis Library. In their absence, Goshen, like many New Hampshire towns remained unchanged. But these young people, who brought back visions of the world beyond, would never be the same.

*This story was reprinted courtesy of The Concord Monitor.



From left to right: WW II veterans Wilbur Hodgman, Donald Hurd, Skip Hawkins, Billy Harold, John Chartier, Buck Trudeau, Frank Hodgman, and Bert Teague. Photo by Deborah Scranton van Paassen

The Story Behind The Film

by Margaret Morrill

Deborah Scranton van Paassen, who produced *Witness to War: Stories From Silence* is a Goshen NH native and a 1985 graduate of Brown University. She spent 15 years working in New York City as a special assignment reporter and feature producer for several television networks such as CBS, ESPN, MTV and The Outdoor Living Network. After marriage and the birth of her son, she decided to leave television work. In 2000 she returned home to Goshen to live on her family's 150-acre farm.

After returning to Goshen, Scranton van Paassen joined the Goshen Historical Society and the Library board. Although she had not planned on making a film about World War II veterans, she volunteered to interview Goshen veterans as part of a history project for the library. This happened after Lilyan Wright, the Goshen Chair of Library Trustees, attended a statewide conference of the NH Library Trustees Association and they requested that local libraries archive interviews with WW II veterans from their own communities.

First, Scranton van Paassen interviewed her neighbor, Rita Trudeau Purmont (WAVES, US Navy), who was the only woman from Goshen to serve, and then Frank Hodgman (10th Coast Artillery Sergeant, US Army), whose daughter Scranton van Paassen used to ride horses with.

Her third interview was with Calvin Leavitt, US Army technician, who spent the whole war on the front lines, and she found herself caught up in the intense

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Governor's Proclamation Honors New Hampshire Caregivers

by Jim Bretz

On October 28, 2003, Governor Craig Benson signed a proclamation designating November as National Family Caregiver Month here in New Hampshire. This proclamation honors the thousands of caregivers statewide who devote countless hours daily to caring for a family member or friend.

National Family Caregivers (NFC) Month is organized each year by the National Family Caregiving Association (NFCA), a grassroots organization dedicated to empowering family caregivers and improving their overall quality of life by providing information, education, support and advocacy.

"Our goal for NFC Month is to move from awareness to action," said Suzanne Mintz, NFCA president and co-founder. "This year we are encouraging people to literally reach out and help family caregivers improve their quality of life. There are so many ways to help, such as preparing a meal or

providing a ride to church. NFC Month recognizes that caregiving is more than a one-person job."

According to a study compiled by the National Family Caregiver Association during the past year, 7.3 million individuals provide care for a chronically ill, disabled or aging family member or friend. The study also showed that the value of the services family caregivers provide for "free" is estimated to be \$257 billion per year.

Contrary to what some people believe, caregiving is not just a woman's issue. Although 56% of the family caregivers are women who struggle to balance work, children and caregiving, the other 44% are men who deal with the same stresses and challenges.

The proclamation signed by Governor Benson acknowledges the dedication of these caregivers in providing the best care they can for their loved

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Introducing Commissioner John Stephen

On October 8, 2003, John Stephen was confirmed by the Governor and Executive Council as the new Commissioner of the NH Department of Health and Human Services.

As Commissioner of the Department of Health and Human Services, Stephen is charged with ensuring the health and well being of New Hampshire residents, with particular emphasis on the most vulnerable citizens. Administrative responsibility includes Medicaid, elder services, financial assistance, mental health, disabilities, drug and alcohol prevention and treatment services, public health, child support, juvenile justice services and child protective services.

Stephen is a 1980 graduate of Trinity High School and a life-long resident of Manchester, New Hampshire. He attended the University of New Hampshire, where he earned a Bachelors Degree in Business Administration in 1984 from the Whittemore School of Business and Economics. After college, he attended Detroit College of Law, part of Michigan State University, and graduated Cum Laude with a Juris Doctorate degree in 1987. He was the Managing Editor of Law Review.

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Dear HICEAS

The following question and answer is provided by Karol Dermon, Medicare Coordinator at the Division of Elderly and Adult Services.

Q: I’ve noticed that Medicare expenses keep going up every year. What is happening for 2004?

A: Yes. The Centers for Medicare & Medicaid Services, formerly the Health Care Financing Administration, has just released the new figures for 2004.

MEDICARE PREMIUMS:

Part A (Hospital Insurance): Most people do not have to pay a monthly Part A premium because they or their spouses have 40 or more quarters of Medicare-covered employment.

The Part A Premium is \$189 for people having between 30-39 quarters. The Premium is \$343 per month for people who are not otherwise eligible for premium-free hospital insurance and who have less than 30 quarters.

Part B (Medical insurance): \$66.60 per month

MEDICARE DEDUCTIBLE AND COINSURANCE AMOUNTS:

Part A: (pays for inpatient hospital, skilled nursing and some home health care) For each benefit period, Medicare pays all covered services EXCEPT the Medicare Part A deductible – \$876 – and coinsurance amounts during the first 60 days.

After that the patient pays:

- ◆ \$219 per day for hospital days 61-90.
- ◆ \$438 per day for hospital days 91-150.
- ◆ All costs after 150 hospital days.

For skilled nursing coinsurance, the patient pays:

- ◆ \$109.50 per day for days 21 through 100 for each benefit period.

Part B: (pays Medicare eligible physician services, outpatient hospital services, certain home health services, durable medical equipment)

- ◆ \$100 per year; and
- ◆ 20% of the Medicare approved amount after the \$100 deductible has been met.

For information about programs that help pay these expenses (such as the Medicare Savings Program), or for answers to other questions about Medicare, please call the HICEAS program toll-free at 1-800-852-3388. Find out what programs you may qualify for!

Adult Day Programs Offer Important Supports

by Paula Faist

When Mike was partially paralyzed by a stroke at the age of 62, he needed help with dressing, bathing, and other aspects of personal care. Although his wife was caring for Mike at home, she could not afford to leave her fulltime job, since the income was needed to meet household and other expenses.

Attending an adult day program enabled Mike to receive the care he needed during the day while his wife was working. The adult day program also arranged for Mike to receive physical and speech therapy prescribed by his doctor. Now, a year later, his condition has improved, and he no longer needs to attend the program.

Lorraine is in the first stages of Alzheimer’s Disease and suffers from memory loss. Her husband, who is retired, cares for her at home, but Lorraine attends an adult day program two days per week. This not only gives her husband some much-needed respite, but gives Lorraine the opportunity to visit with other people and enjoy some of the other activities provided by the adult day program, such as cooking classes and field trips.

What is an adult day program?

Adult day programs are an important part of the continuum of care for elders and their families and for younger adults affected by chronic illnesses or disabilities. For every person who attends an adult day program, at least two people are truly being served: the individual attending the program and the caregiver.

An adult day program offers daily social, physical, cognitive and medi-

2004 Conference on Aging Date Set

The fourth annual NH Conference on Aging will be held on Tuesday, May 4, 2004 at the Grappone Conference Center, Courtyard Marriott, in Concord. The theme will be *Building Tomorrow Today: You Are The Architect of Your Future*.

The conference is sponsored jointly by the Division of Elderly and Adult Services and the New Hampshire State Committee On Aging, which is chaired by Mendon MacDonald, MD.

The conference, which has been filled to capacity over the past two

years, will offer participants an opportunity to add to their “tool kit for aging.” Those who attend will have the opportunity to take home useful, practical information and materials. In addition to the daylong program of presentations and workshops, a variety of organizations and businesses that provide services and products to elders will be exhibiting that day. A buffet luncheon will also be included.

More information on workshop topics, speakers and registration will be released in a few months. Limited scholarships will also be available.

Winning The Race Against Medicare Fraud

by Christine Lizotte

Have you noticed street stock car #26 cruising down the Interstate? Have you seen it parked at your local racetrack, a county fair, or at a new store opening? If so, please say stop and say hello to race car driver Neil Evans and Andrea Sprague, a volunteer from the Health Insurance Counseling Education and Assistance Services (HICEAS).

Neil and Andrea are traveling around the state educating NH citizens about Medicare, including Protecting Quality Health Care and the Medicare Savings Program.



Stock car #26 driver Neil Evans.

The Medicare Savings Program assists people who have limited income and resources by helping them with payments on their Medicare premiums and/or deductibles. HICEAS Volunteers are trained to help people complete the applications for these programs.

Protecting Quality Health Care helps protect Medicare and Medicaid from fraud, waste and abuse and teaches people how to protect themselves, Medicare and Medicaid from being scammed. HICEAS and PQHC volunteers help people better understand the way services are billed, what is covered and not covered, and what to do if you think Medicare or Medicaid is being overcharged for services.

HICEAS volunteers like Andrea are trained and certified to inform consumers, family members, caregivers and professionals on all aspects of Medicare. HICEAS volunteers are located at sites throughout the state. and can help you in many ways. Among other things, they can show you how to sign

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cal activities to the participants. It also offers respite and peace of mind to the caregiver, since the caregiver knows that his or her family member is at a facility where support and supervision are part of the daily routine.

Who attends adult day programs?

Persons who attend adult day programs can range anywhere from 18 to over 100 years of age. Some participants are socially isolated at home, since their family caregivers work full time and have other activities. Some have physical disabilities or memory

problems, or may be recovering from strokes, heart attacks, injuries caused by accidents or other conditions.

What services are provided?

No matter what the reason for attending may be, the services provided in an adult day program include: health monitoring, nursing care, meals, socialization, personal care, counseling, group and individual activities. Some adult day programs in New Hampshire also offer transportation to and from their locations. If the participant’s physician recommends

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Aging Issues

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Send news items or other correspondence to NH DEAS, 129 Pleasant Street, Concord, NH 03301-3857, Attention: Margaret Morrill for *Aging Issues*, or email mmorrill@dhhs.state.nh.us

The Silent Epidemic

by Margaret Morrill

Older adults who have problems with alcohol, drugs and/or mental illness are out there in greater numbers than we realize, and they need help.

This was the message given to the Governor’s Commission on Alcohol & Drug Prevention, Intervention & Treatment at the Commission’s quarterly meeting on July 11, 2003. The Commission advises the governor regarding policy, funding, and the delivery of effective, coordinated alcohol and drug abuse prevention and treatment services.

Todd Ringelstein, Vice-Chair of the NH Coalition on Substance Abuse, Mental Health and Aging, and Don Robinson, a Coalition member, presented information on older adult issues.

As many as 19% of adults age 60 and older may have problems with alcohol or drugs. This percentage is likely to increase concurrently with the aging population. As many as 20% of the nation’s elders suffer from mental illnesses, including depression, anxiety and other conditions, and could benefit from treatments such as medication or counseling.

Although not everyone who drinks regularly has a drinking problem, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommends that people consider getting help if they hurt themselves or someone else while drinking, have medical, social or financial problems caused by drinking, if they drink to calm their nerves or reduce depression, if they often drink alone, need more alcohol to get high or feel irritable, resentful or unreasonable when they are not drinking.

Regarding drug misuse, for older adults, this generally means that they do not use medicines (either prescription or over-the-counter drugs) safely. According to the National Institute on Aging, some examples of unsafe medication use can include not taking medication as prescribed, mixing alcohol with medicines or taking excessive amounts of over the counter drugs.

Consequences of alcohol or drug misuse can be severe. They include, among others, aggravation of existing health problems, dangerous drug reactions when medicines are not taken according to directions, or when alcohol is mixed with either prescription or over the counter drugs, higher risk of falls, fires or other accidents, of eviction or losing the ability to live independently.

Why do older persons experience alcohol and drug problems? Some people may begin experiencing these problems early in life or later on due to the challenges that people experience as they age, i.e. bereavement, chronic pain or decreased mobility, loneliness, financial problems or caregiver stress. Some other contributing factors include lack of understanding about the effects of alcohol, difficulty reading or following prescriptions and/or the complications that can result when a person obtains prescriptions from more than one physician.

Alcohol or drug misuse among elders can be harder to detect. Health care providers may mistake the symptoms of alcohol or drug misuse for dementia or other conditions that can occur later in life. The elder’s family and friends may deny that the problem exists. Elders themselves tend to be less visible, i.e. less likely to be employed or homebound due to illness. They are also less likely to seek professional help.

“They suffer in silence,” said Don Robinson, aged 71, who has had a life-long struggle with alcoholism and depression.

What can be done?

According to Todd Ringelstein, there is hope.

“Research and testimonies from numerous recovering older adults clearly show that treatment works,” said Ringelstein. “Substance abuse and depression are not a normal part of the aging process and should be treated. Oftentimes, professionals and family members brush off addiction and mental health issues with older adults. The trick is to have specialized older adult services provided by qualified staff and to have support and understanding from family members.”

Also key is the provision of information and outreach to elders on the use of alcohol and the management of medications.

Specialized and affordable alcohol and drug treatment services for older adults are not always easy to find. Many of New Hampshire’s existing alcohol and drug treatment facilities have long waiting lists, and treatment programs may be geared toward a younger population.

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From the DEAS Director’s Desk

Dear Reader:

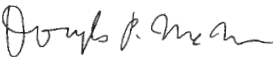
A lot has happened since I last wrote to you. We now have a new Commissioner, John A. Stephen, who comes to us from the Department of Safety and has worked previously in the Hillsborough County Attorney’s Office and the Attorney General’s Office. Commissioner Stephen was confirmed by Governor & Council on October 8, 2003.

We have just completed a difficult process of making budget cuts to achieve goals required by the state budget. These goals have been achieved with a minimal impact on services to our population.

Although you may have heard of a Wait List for our Home and Community Based Care program for the Elderly and Chronically Ill (HCBC-ECI), there will not be one. After meeting with legislative leaders, the Department of Health and Human Services has agreed to manage the need for additional resources for the HCBC-ECI program within the Department without a waiting list.

The Department is looking at reorganizing in order to operate more efficiently with limited resources. By the time I write to you again, I will have more information on this subject.

Sincerely,



Douglas P. McNutt

Getting Older, Getting Better

by Margaret Morrill

At 71, Don Robinson says he has more happiness and peace of mind than he ever had in the past. He enjoys crafts and sports, and frequently has a Red Sox baseball cap perched on his head. He volunteers for three different organizations. He is a great-grandfather. With his twinkling blue eyes and white beard, he bears a resemblance to Santa Claus.

But if Robinson has more peace of mind, it is a peace that must be won again each day in his battle with two lifelong enemies: alcoholism and depression.

Robinson spent his growing up years in Massachusetts. His father was a machinist, his mother a seamstress in a woolen mill. Since his parents worked long hours, he did not see as much of them as he would have liked. His one sibling was a sister five years older than himself.

After graduating from high school, Robinson went to work as a machinist in a company where he was to remain for 26 years. At the end of the day, he and his co-workers would often go out drinking.

“As long as you could reach the bar and had a quarter, you could get booze,” Robinson recalled.

At 25, Robinson married (he was not ready, he says) and he and his wife had a son and daughter. After 10 years, the couple divorced. By the time Robinson

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Calling All Aging Issues Readers!

Aging Issues is now in its sixth year of publication. Our purpose is to provide information to New Hampshire’s older citizens on programs and services administered by DEAS and other Department of Health and Human Services program areas, current legislative initiatives, news from the State Committee on Aging and Area Committees on Aging, and other resources and events that may be of interest. We also

seek to highlight the valuable contributions made by New Hampshire’s older citizens to the State and to their communities.

To help us serve you better, we invite you to take a few minutes to complete this survey and mail it to Margaret Morrill, NH DEAS, 129 Pleasant St., Concord, NH 03301, ATTN: *Aging Issues* or email your comments to mmorrill@dhhs.state.nh.us

- My living arrangement is (please check one of the following):
☐ own home or apartment ☐ with relatives or friends ☐ retirement community
☐ residential care ☐ nursing facility ☐ other (specify) _____
 - My age is (optional): _____
 - What do you like most about *Aging Issues*? _____
 - What would you like to change? _____
 - What suggestions do you have for future articles or features? _____
 - Do you have suggestions about the format of the paper, i.e. color, print size? _____
- Other comments: _____

Thank you!

Proclamation *continued from page 1*

ones even under difficult and frustrating circumstances. Often, many caregivers feel isolated and alone, with little or no support or recognition for all that they do. Others do not consider themselves caregivers, but “just people taking care of a family member in need.” New Hampshire’s communities are filled with these unsung heroes, and we all need to take the time to thank them and to honor them for the hard but loving work that they do.

If you are a caregiver, take a minute to pat yourself on the back. You have taken on a tremendously difficult task, and have done it well. You also need to know that you are not alone! There are resources available to help you, including The Family Caregiver Support Program administered by DEAS (please see below).

If you know someone who is a caregiver, consider bringing that person some flowers or a little gift, something they can enjoy, or offer to take them out to lunch as a thank you for the care they provide. These are some things you can do right now during

National Family Caregiver Month and more importantly, throughout the year, to show your support and appreciation.

Jim Bretz administers The Family Caregiver Support Program at DEAS.

The Family Caregiver Support Program

The Family Caregiver Program is administered by DEAS and funded under The Older Americans Act. The program provides the following services:

- ◆ Information and assistance in accessing programs;
- ◆ Individual counseling;
- ◆ Support groups;
- ◆ Caregiver training;
- ◆ Respite care; and
- ◆ Supplemental services that complement the care provided by family caregivers (some examples of these services include adult day care, homemaker and transportation).

For more information on the Family Caregiver Support Program, call **1-800-351-1888, Ext. 4687** or email NHFamilyCareGiver@dhhs.state.nh.us

With A Little Help Create a “safety zone” for a loved one with dementia

by Dennis Hett

Each individual who develops Alzheimer’s Disease or another dementia moves through the disease in her or his own way.

If you are a caregiver, you face an ongoing challenge. You must adapt to each change in the person’s behavior and functioning.

Think of the challenge as creating a “safety zone” with fewer hazards. As you do this, you’ll begin to reduce the stresses and thereby make life easier for you and the person you care for.

Home Safety for Persons with Alzheimer’s Disease, published by the Alzheimer’s Disease Education & Referral Center of the National Institute on Aging, gives helpful advice and guidance. The publication suggests three principles to get us facing in the right direction:

Minimize danger – Help the individual to feel more secure; they will remain more independent if they feel safe.

Think prevention – You can’t foresee every danger, but you can take control of many potential hazards.

Adapt your environment – You can’t change the person’s behavior, but you can decrease hazards and stressors.

The publication suggests several measures that cost very little:

- ◆ Display emergency numbers and your home address near all telephones.
- ◆ Install secure locks on all outside doors and windows.
- ◆ Hide a spare house key outside, in case the person you are caring for locks you out of the house.
- ◆ Place lamps and appliances close to electrical outlets so you won’t need to use extension cords. Tack cords to baseboards to prevent falls.
- ◆ Cover unused outlets with child-proof plugs.
- ◆ Place red tape around floor vents, radiators, and other heating devices.

This will deter the person with dementia from standing on or touching a hot grid.

- ◆ Eliminate clutter, which can create confusion and danger. Keep all walk areas free of furniture.
- ◆ Remove all poisonous plants from the home. Check with local nurseries or poison control centers for a list of poisonous plants.

Home Safety for Persons with Alzheimer’s Disease also gives tips for making every area of your house safer: entryways, kitchens, bedrooms, baths, living rooms and laundry rooms.

The publication also shows how to adapt to specific behaviors: wandering, rummaging/hiding things, hallucinations and delusions.

You may read and download *Home Safety for Persons with Alzheimer’s Disease* free at the following Internet address: www.alzheimers.org/pubs/homesafety.htm

For additional peace of mind, enroll your loved one in the Safe Return Program, sponsored by the Alzheimer’s Association. Safe Return helps to identify and return individuals with Alzheimer’s disease and related dementias who wander off and become lost.

For details, visit the following website: www.alz.org/ResourceCenter/Programs/SafeReturn.htm

Are you facing a caregiving challenge? Create a “safety zone” – Minimize danger, think prevention, adapt your environment!

Dennis Hett served a total of 25 years as CEO of three organizations representing not-for-profit homes and services for the aging in Massachusetts, New Jersey and the northern New England states. Dennis is co-chair of the Manchester Regional Area Committee on Aging and a member of the Long Term Supports Committee of the State Committee on Aging.

Avoiding Common Tax Pitfalls During Retirement

by Paul Leavy

Many people fail to plan for paying federal income taxes that may be due after retirement. Some people also incorrectly think that no taxes are due when one attains a certain age (65 years of age, for instance). These people fail to realize that owing taxes is more a function of how much income is received during the year than the age of the recipient. Because of these assumptions, tax issues may catch a person unaware. According to a study by an Internal Revenue Service research group, approximately 10% of income tax returns filed by people age 55 or older show federal taxes owed. This amounted to over 11.7 million people in the year 2000.

Did you know...?

- ◆ If you are receiving Social Security payments, your payments may be taxable.
- ◆ If you are receiving pension or annuity payments, some or all of your payments may be taxable.
- ◆ If you take a distribution from an IRA before you reach 59½, additional tax may be assessed equal to 10% of the taxable part of the distribution.
- ◆ If you are receiving Social Security payments and work part time or if you have a small business, earnings are still taxable. Collecting Social Security does not provide relief from paying Social Security taxes on income, no matter what your age.
- ◆ If you sell stocks or bonds at a profit, you may have a taxable capital gain.
- ◆ If you expect to owe the Internal Revenue Service \$1,000 or more at the end of the year, you may need to make estimated tax payments.

Avoiding Possible Problems

The Federal Tax System is designed on a pay- as- you- go concept, and taxes must be paid throughout the year. People that work for employers accomplish this task by having their employer withhold for them. People that receive other types of income (especially without any type of withholding) may have to make estimated tax payments. An unpaid tax liability on April 15 of \$1,000 or more can result in a substantial underpayment penalty. Here are some actions that you can take to prevent future problems:

- ◆ Withhold on a pension or annuity payment. You can ask your former employer or contact the IRS regarding Form W-4P, Withholding Certificate for Pensions and Annuities
- ◆ If, during the course of the year, you are selling stocks or bonds, are receiving rental income or alimony, or if you are self-employed, complete the worksheet on Form 1040-ES, Estimated Tax, and estimate your tax for the year. If you happen to owe more than \$1,000, then quarterly payments may be required.
- ◆ Research the tax consequences before receiving distributions from your retirement plan.
- ◆ Always plan for unexpected contingencies. Some people may have an unexpected and extraordinary expense, and they may want tap into monies from the sale of stocks and bonds. Be aware that you may have to adjust estimated payments in order to avoid any estimated tax penalty. Know the tax basis (generally, the amount paid when the purchase was made) of any stocks and bonds that you sell, so that you can accurately calculate the gain (income) from the sale.

For more information, contact the Internal Revenue Service at www.irs.gov, by phone at **1-800-829-1040**, or visit an IRS Tax Assistance Center. Helpful publications include Publication 554, *Older Americans’ Tax Guide*; Publication 575, *Pension and Annuity Guide*; Publication 590, *Individual Retirement Accounts*; and publication 505, *Tax Withholding and Estimated Tax*.

Paul Leavy is the Senior Tax Specialist for Stakeholder Partnerships, Education and Communication. (SPEC). SPEC is an organization within IRS whose main mission is to “assist customers in satisfying their tax responsibilities by building and maintaining partnerships with key stakeholders, seeking to create and share value by informing, educating and communicating with our shared customers.” SPEC works with AARP in the Tax Counseling for the Elderly Program, setting up tax preparation sites to assist the elder population.

CONFIDENTIAL

Did you know?

... If you’re over age 60 or disabled, you can apply for food stamps from home.

... When you use our new electronic benefits card, no one but you and the supermarket checkout clerk will know.

New Hampshire Food Stamp Program

1-800-852-3345 ext. 4238

Senior Information Fair Held In Strafford County

by Becky May

On November 1st, 2003, more than 175 seniors and caregivers attended a Senior Information Fair held at the Frisbie Memorial Hospital Conference Center in Rochester. The fair was sponsored by the Strafford County Committee on Aging and ServiceLink of Strafford County, and the marketing was sponsored by Frisbie Hospital.

The fair gave area seniors and their family members a chance to talk with representatives from 27 organizations providing services to elders, to obtain information about services and choose from 16 workshops on topics such as The Senior Law Project, Home Safety,

Fibromyalgia, Myths of Aging and Adult Day Care Services. Attendees also had the opportunity to obtain flu shots, blood pressure checks, balance checks and diabetes screenings.

Feedback about the fair was very enthusiastic from all involved. If you'd like to receive information about future Senior Information Fairs in Strafford County, call ServiceLink at **603-332-7398**, email servicelink@straffordnetwork.org, or write to ServiceLink at 1 Wakefield St, Suite 306, Rochester, NH 03867.

Becky May is the Director of Strafford County ServiceLink.

Medicare Fraud *continued from page 2*

up for Medicare; answer billing questions; show you how to compare supplemental insurance plans; file appeals; and inform you about preventative care options covered by Medicare.

For more information about HICEAS, PQHC, the Medicare Savings Program and volunteer opportunities, call NH Help Line at **1-800-852-3388** and ask for a HICEAS volunteer. All services provided by these pro-

grams are confidential. Best of all, these services are free! And if you see stock car #26, we hope you'll stop and say hello to Neil and Andrea, ask questions you may have about Medicare and take some brochures. And don't forget to keep the **1-800-852-3388** number handy in case you need help.

Christine Lizotte is the director of New Hampshire's HICEAS program.

Senior Center Update

Centennial Senior Center To Open In January

At long last, the Concord area welcomes its first multi-purpose senior center! The Centennial Senior Center, located at 37 Regional Drive in Concord, will open its doors in the latter part of January 2004.

The 28,000+ square foot facility, set on nearly eight acres of wooded property, will have access from both Regional Drive and Pembroke Road. Not restricted to Concord residents, anyone age 50 and older may join Centennial, and take advantage of a host of Center amenities and services. Center members can enjoy a delicious mid-day meal, shop for unique handmade items from area artisans, browse the lifestyle library, e-mail a family member or friend, exercise in the fitness room, or relax in the spa and therapy pool.

For a membership brochure, and additional information, please call **228-6630**.

Journey With Me

"Journey With Me", a 12-week writing course especially designed for seniors by Fran Lyons from Newbury, NH, was held at the Bradford Area Senior



At the Bradford Senior Center, October 27: John Warren shares a story he has written with other members of the "Journey With Me" class and author Reeve Lindbergh.

Center this fall. Lyons has also given the course at Havenwood Heights in Concord and at Fox Chase, an assisted living facility in Sutton. The course provided participants with a great opportunity to explore various genres, including fiction, non-fiction, history and biography, and to share their written work. One of the highlights of the course was a visit from Reeve Lindbergh, noted author and daughter of Charles and Anne Morrow Lindbergh. Reeve Lindbergh was the guest

speaker at the class held on October 27. "Journey With Me" will be offered again beginning on **January 5, 2004**, at a cost of \$25.00. To register, call the Bradford Senior Center at **938-2104**.

Getting Older *continued from page 3*

married again, his drinking was getting worse. He had epilepsy, the result of a childhood fall. He was also depressed to the point that he didn't want to get out of bed in the morning.

In 1988, Robinson moved to New Hampshire. Although medication was prescribed to treat his depression, Robinson experienced adverse drug reactions when he combined pills with

alcohol. When doctors told him to stop drinking, he stopped taking the medicine instead. Between 1988 and 1998, he was hospitalized 27 times.

"I was a rebel," Robinson admitted. "I knew all the answers."

In 1998, Robinson became suicidal and was admitted to New Hampshire Hospital. After a few months stay in a psychiatric halfway house, he was

able to return to the community and live in his own apartment. Although he has had some other short-term hospitalizations since then, he says he has not had a drink in a long time, and that his general outlook on life has improved.

What has made the difference at this point? Robinson says it's a combination of things, including finding a counselor whom he likes and trusts

and learning how to better manage stress. He has a friend his own age, also recovering from alcohol problems, whom he can confide in. He also joined a 12-step recovery program that enabled him to trust in a higher power.

"God stepped into my life," says Robinson. "All I have to do is not drink today."

continued on page 7

You Can Make a Difference!



Become a Long-Term Care Ombudsman* Volunteer

Advocate for Nursing Home Residents

- Help to ensure their quality of care and life
- Learn about long-term care, aging, advocacy and more
- Protect and promote Residents' Rights
- Receive reimbursement for service-related travel
- Set your own schedule

For information, contact

Judith Griffin, Volunteer Program Coordinator
Long-Term Care Ombudsman Program
(800) 442-5640 or (603) 271-4396
email: jgriffin@dhhs.state.nh.us



*Ombudsman is a Scandinavian word that means "advocate." Volunteer Ombudsmen advocate for residents of nursing homes and residential care facilities as they visit with them and monitor the quality of care.

Silent Epidemic *continued from page 3*

Don Robinson believes that peer support is also very important to elders trying to cope with alcohol issues or mental illness, and recommended that the Commission have a committee on this issue. "Seniors need someone to reach out to them," he said.

The NH Coalition on Substance Abuse, Mental Health and Aging is a non-profit organization whose mission is to help people with the challenges they face as they age, with regard to the use and management of alcohol and medications and maintaining good mental health and to be treated with dignity and respect. The goals of the Coalition are education, advocacy, and the distribution of resource information. The Coalition meets quarterly and welcomes new members. For more information, contact Margaret Morrill at 1-800-351-1888, Ext. 4683 or Todd Ringelstein at 1-800-852-3345, Ext. 5094.

HELPFUL RESOURCES

The Referral Education, Assistance and Prevention Program (REAP).

REAP is available to all older adults in the community and offers free and confidential counseling services to help older adults understand and deal with life changes, and to address problems related to alcohol, medication misuse or depression.

REAP is administered by the NH Housing Finance Authority (NHHFA) and is funded by NHHFA, the Division of Elderly and Adult Services, the Division of Behavioral Health and the Division of Alcohol and Drug Prevention and Recovery. For more information about REAP and other community resources, call NH ServiceLink toll-free at **1-866-634-9412**.

Community Mental Health Centers. Community mental health centers provide specialized services to older adults, including, among others, assessment, counseling, family/caregiver support, and medication evaluation and monitoring services. There are 10 community mental health centers statewide. To locate the community mental health center in your area, contact the NH ServiceLink Network (see above) or the NH Division of Behavioral Health, Older Adult Administration Unit, at **1-800-852-3345, Ext. 5094**.

The National Alliance for the Mentally Ill, New Hampshire Chapter (NAMI NH). NAMI NH provides information, education and support for families and consumers of mental health services. The NAMI NH office is located at 15 Green St., Concord, NH. For more information, call **1-800-242-6264** (toll-free) or access the website at www.naminh.org In cooperation with other organizations providing services to elders, NAMI NH has also published, "Mental Health, Mental Illness, Healthy Aging: A NH Guide for Older Adults and Caregivers" The text of the guidebook may be found on the NAMI NH web site.

Commissioner Stephen *continued from page 1*

Upon his graduation from law school in 1987, Stephen began his legal career as a Law Clerk for United States Federal District Court Judge Martin F. Loughlin.

After serving one year as a Law Clerk, Stephen became an Assistant Hillsborough County Attorney where he prosecuted numerous misdemeanor and felony crimes. In March 1992, he became an Assistant Attorney General with the New Hampshire Department of Justice. In that capacity, he was the Director of the DWI Unit and was responsible for the state-wide supervision of DWI-related cases. In addition to his duties as Director of the DWI Unit, Stephen prosecuted homicide crimes and regularly appeared before the New Hampshire Supreme Court on appellate issues involving criminal law.

In 1998 Governor Jeanne Shaheen appointed Stephen as Assistant Commissioner of the Department of Safety. Governor Craig Benson re-appointed him to the position in March of 2003. In this capacity he managed the Division of Fire Safety and Emergency Management, including the E-911 Bureau, and served as the Commissioner's designee on numerous Commissions and Committees.

Stephen was also appointed by Commissioner Richard Flynn as the State of New Hampshire's Coordinator of Homeland Security. In that capacity he acted as a liaison between the U.S. Department of Homeland Security and the state, county, and local governments in New Hampshire. Stephen was also the architect behind the Memorandum of Understanding between the Department of Safety and the Department of Health and Human Services, consolidating emergency preparedness responsibilities and centralizing hospital bioterrorism funding.

Stephen also lectures nationally on various legal and homeland security-related topics.

Stephen is a co-author of the National Highway Traffic Safety Administration course on vehicular homicide entitled *Lethal Weapon*. He has also authored a number of books, including the *New Hampshire DWI Manual*, *Officer's Search and Seizure Handbook*, *Officer's Arrest Handbook* and co-authored *Officer's DUI Handbook*, *Investigation and Prosecution of Vehicular Homicide/DWI*, and *Courtroom Survival: Making the Traffic Officer a Powerful Witness*, all available through LEXIS® Law Publishing.

Stephen is married and has two children.

Adult Programs *continued from page 2*

physical, occupational and/or speech therapy, arrangements can often be made for these therapies to be given while a participant attends the program.

Are adult day programs licensed, and how are they staffed?

New Hampshire law requires that adult day programs serving three or more clients must be licensed by the Department of Health and Human Services, Health Facilities Administration – Licensing. There are currently 29 licensed adult day programs in New Hampshire. There are adult day programs located in just about every county in New Hampshire.

In addition to a medical director who oversees the adult day care program, other staff may include a registered nurse, a licensed practical nurse, a social worker, licensed nurses aides, a gerontology specialist, van drivers, and volunteers.

What is the routine?

Most adult day programs operate between the hours of 7am and 6pm, Monday through Friday. A typical day at an adult day program begins with a light breakfast followed by a pre-planned activity. A hot meal at lunch is served before afternoon activities begin. A light snack is also prepared in the late afternoon after a day full of social activities, exercise classes, discussion groups, outings, and reminiscing. Medical needs are addressed throughout the day, and there are opportunities for rest.

What are the benefits?

There are many benefits that can be derived from attending an adult day program, which can help individuals remain in their own homes and relieve or prevent caregiver burnout by providing support and respite services. Adult day programs can prevent or delay costly long-term care alterna-

tives, such as nursing home care and reduce unnecessary hospitalization by providing ongoing health monitoring. In addition, adult day programs also help people being discharged from a nursing home or other residential setting by reintroducing them to community life.

How much do adult day care programs cost?

The average cost of adult day programs ranges anywhere from \$45-75 per day. Some participants pay privately; others may be able to obtain assistance through sources such as Medicaid, the Home and Community Based Care Program for the Elderly and Chronically Ill (HCBC-ECI), which is available to Medicaid-eligible individuals who meet certain eligibility criteria, VA contracts, and some available grant monies.

Where can I obtain more information?

Your doctor can help you determine whether your family member would benefit from attending an adult day program. A list of licensed adult day programs can be obtained by calling Health Facilities Administration – Licensing at **800-852-3345, Ext. 4592**. The NH ServiceLink Network (call **1-866-634-9412** toll-free) can also help you locate adult day programs in your area. It is best to visit the adult day programs you are considering, discuss the needs of your family member, and obtain information about key issues such as staffing, available program activities and costs.

Paula Faist is program director at the Silverthorne Adult Day Program in Salem, NH. She is currently president of NH Adult Day Services, a nonprofit organization of adult day providers which meets six times per year and focuses on information sharing and advocacy.

Special Concert Will Honor Musician Paul Bordeleau

by Bob Montgomery

An icon in the New Hampshire world of music and beyond, Paul Bordeleau—entertainer, teacher, musical philosopher, and community activist—will celebrate his 80th birthday on Sunday, January 11, 2004 with a matinee concert to benefit The Palace Theater in Manchester.

Originally planned as one of his regular Sunday afternoon concerts that have become popular with Greater Manchester music lovers, the January 11 performance was moved to the Palace Theater at the behest of former Manchester mayor Sylvio Dupuis, now chairman of the board of directors at the Palace.

Bordeleau, who counts in the thousands the number of friends and students he has come to know over the years, is now putting together the program. Already, dozens of performers from decades of Manchester entertainment have accepted the invitations to appear, and will be featured on the bill, highlighting Bordeleau's career.

Paul and his wife Wilma, who is now retired, are both recognized as major artists on the Manchester musical stage. For many years, having performed at virtually every entertainment venue in New England, Paul played a keyboard instrument and Wilma was his accompanying vocalist. Now he changes the lineup to fit the occasion the group is playing for, which could be anything from a reception to a jazz festival.

The theme of the January 11 concert will be, "This Is Your Life, Paul Bordeleau". Doug Rickard, pastor of the First Presbyterian Church and an accomplished musician, will be master of ceremonies. Rickard plays guitar, banjo, and bagpipes.

Among the musical selections will be "Strike Up The Band," featuring Paul and his daughter Jan, joined by Pat Hebert and Jim Butka. The vocalists will include Paula Payne, a jazz singer now appearing mostly on the Chicago scene; she holds a doctorate degree and serves full-time as a lieutenant colonel at Otis Air Force Base.

Candace Glickman, a final-ten competitor in the year 2003 Miss America pageant, will also be a vocalist on the program. And one of the featured guest singers will be the man who inspired the idea of celebrating Bordeleau's birthday with a special concert, former Mayor Sylvio Dupuis.

Other well-known musical names are already booked for the January 11 show, and include: Patty Burke Wagner, a vocalist and member of the group "Sunburst"; Theresa Simard, a highly popular singer who appears regularly at Bordeleau concerts; Paul's son Ed Bordeleau on the bass guitar; and Don Turcotte, drummer.

Tickets for the event will go on sale at the Palace Theater box office and by mail.

Bob Montgomery is a member of the State Committee on Aging and is the author of "View From The Hill", a column published by Neighborhood News Publications. He lives in Goffstown.

Veterans *continued from page 1*

sity of his story. At one point, Leavitt told her, "If you did a book, I'd buy it." "I told him, 'I can't do a book, but I know how to make a film'," said Scranton van Paassen.

To produce *Stories From Silence*, Scranton van Paassen collaborated with Peter Ciardelli, a Film & Video Production Advisor at Dartmouth College, and put in 18-hour days of research and more interviewing. The film was first shown this summer at Goshen's Old Home Day celebration to an audience of more than 600.

"I wanted the film to be for veterans and their families, and for the community," said Scranton van Paassen. "I wanted people to know the faces behind the names on Goshen's war memorial".

The film is enhanced by traditional New England tunes on a soundtrack from Great Meadow Music. "We wanted the music to have the flavor of the region," said Scranton van Paassen.

Stories From Silence was also a highlight of the *Somewhat North of Boston* Film Festival, which was held on the weekend of November 8-9 in Concord, NH.

Commenting on *Stories From Silence* in the November 7 issue of The Concord Monitor, editor Mike Pride said, "Scranton's film could lead you to wonder if they make them like they used to, but every generation asks that question. What she and her cast of stars have rescued from silence is in fact a story of hope. In the fullness of their lives, these veterans embody the promise of America, tested and fulfilled."

Witness to War: Stories from Silence is supported, in part, by a project grant from the New Hampshire Humanities Council. Beginning in 2004, the film will be available on loan from the Humanities Council to non-profit groups and community organizations. Scranton van Paassen also hopes to obtain funding to enable copies of the film to be distributed to schools, libraries, veterans groups and other organizations.

For more information and to find out how to obtain a videotape of *Stories From Silence*, check out the web site at www.storiesfromsilence.com



Winter Calendar

State Committee on Aging Meetings

For information, call Peggy Knight at DEAS (1-800-351-1888, Ext. 0549).

Area Committees on Aging

Meeting schedules and locations are subject to change. For more information, call the ACOA Chairperson listed on the directory page of *Aging Issues*.

Belknap – Third Tuesday of each month at 1pm, at varying locations

Carroll – Second Wednesday of each month at 1pm, at the Tri County CAP Resource Center, Route 16, Tamworth, NH

Cheshire (Monadnock Senior Advocates, covering Cheshire County and western Hillsborough County) – Third Wednesday of each month at 9am, at varying locations

Coos – Second Tuesday of every even-numbered month (February, April, June, etc.) at 10 am, in varying locations.

Grafton – Fourth Monday of each month, at 9:30 am, at the Plymouth Regional Senior Center

Greater Manchester – Third Thursday of each month, at 1:30 pm, at varying locations.

Greater Nashua – Last Wednesday of each month, at 1:30pm, at the Senior Activity Center on Temple St. in Nashua.

Merrimack – Third Tuesday of each month, at 10:30 am, at varying locations.

Rockingham – Second Tuesday of each month, at 10am, at varying locations.

Strafford – Second Thursday of each month at noon at either The Wentworth Home in Dover or the VNA in Rochester.

Sullivan (Sullivan/Kearsage Senior Advocates, covering Sullivan County and northwestern Merrimack County) – Second Tuesday of each month, at 9:30 am, at varying locations.

North Country Senior Action (Tri-County area, covering Coos, Carroll, and Grafton Counties) – Fourth Friday of each month, at 9:30 am, at varying locations.

Support Groups

The Vision Rehabilitation Group provides information, resources and support for persons age 55+ who live with visual impairment. Free. Meets **2nd Mondays from 1:30-3:00pm**, at Havenwood Heritage Heights, 33 Christian Avenue in Concord. Next meeting: **December 8**. Sponsored by Sight Services for Independent Living.

Self Help for the Hard of Hearing of New Hampshire meets on **1st Wednesdays, at 6:45 pm**, at Prime Time, 195 McGregor St.,Manchester. Captioning services are provided at the meetings. The following are the programs planned for December and January:

December 3, 2003 – “Hearing Loss and Technology”, a powerpoint presentation by Joan Marcoux, Hearing and Vision Program Specialist at DEAS. Haven’t completed your holiday wish list yet? Here’s your opportunity to learn about those assistive devices, (some low-tech and some high tech) that may be suitable for you and that you would want to put on that wish list! Come and learn about what is available to enhance your communication in personal, social, recreational and vocational situations.

January 7, 2004 – We Don’t Live in a Norman Rockwell World Anymore: Important Presentation For Seniors. Find out how to protect yourself! Being informed is your best defense! Some of the topics covered include identity theft, mail fraud, health care fraud, sweepstakes fraud, telemarketing fraud, internet fraud AND find out what to do if you’ve been scammed. Presenter: Brenda Loch, Manager, Consumer Affairs, United States Postal Service, New Hampshire District.

Parkinson’s Support Group, offering information, education and mutual support to those with Parkinson’s and their caregivers, meets on **3rd Wednesdays, from 1-2:30pm**, at the Community Council of Senior Citizens (CCSC), 7 Junkins Avenue in Portsmouth. No charge to attend, but RSVPs needed for special programs. Call the CARING Program at **431-1980**.

Alzheimer’s Family Support Group, offered by CCSC (see above) in conjunction with Frisbie Memorial Hospital in Rochester. Meets from 6:30-8:00 pm on 1st and 3rd Mondays, at Frisbie Hospital’s Conference Center. Call **431-1980** for more information.

Men’s Discussion Group meets from on **2nd and 4th Wednesdays from 2:00-3:30 pm**, at CCSC (see above), 7 Junkins Avenue in Portsmouth. A donation of \$1.00 is requested for refreshments. Be prepared for lively discussions! For more information, call the CARING Program at **431-1980**.

Education

Social Security Information Session, December 11, 10:30-noon, at the Richard W. Black Senior Center, Hanover, NH. Free. Lunch served following session. Sponsored by AARP. To reserve, call **1-877-926-8300**.

Getting Older *continued from page 5*

After all he’s been through, Robinson has a special empathy for older persons who struggle with alcoholism or mental illness. As a widower (his second wife died 20 years ago), he understands grief and loss, and he understands what it’s like to feel powerless. He also believes that society as a whole ignores elders, and that they don’t like to ask for help.

“They’re out there,” Robinson says. “They’re scared and they’re lonely. And they need someone to reach out to them.”

Robinson believes that this outreach should come initially from professionals, since they can counsel the older person about treatment and other sources of help. However, he emphasizes that treatment will not be effective unless it addresses the feelings of loneliness and isolation that many elders experience. And peer support from someone the elder’s own age, who can gain his or her trust, is important.

“Everyone needs a friend,”Robinson said.

What is Robinson’s message to elders who have problems with alcohol or mental illness?

“Don’t give up. You can get better. If I can do it, you can too.”

NOTE: For resource information, please see page 5.

The New Hampshire ServiceLink Network

1-866-634-9412

www.servicelink.org

Belknap County ServiceLink

The HealthLink Building
575 Main St., P.O. Box 1327
Laconia, NH, 03247-1327
Local Line: 528-6945
Lisa Morris, Director

Carroll County ServiceLink

448 White Mountain Highway
P.O. Box 420
Chocorua, NH 03817
Local Line: 539-7203
Susan Deyoe, Director

Coos County ServiceLink

Berlin Senior Center
610 Sullivan St., Suite 6
Berlin, NH 03570
Local Line: 752-6407
Janice Gingras, Director

Grafton County ServiceLink

Center for Elder Services
10 Campbell St., P.O. Box 433
Lebanon, NH 03766
Local Line: 448-1835
Co-Directors: Dana Michalovic,
Karen Whitaker

Littleton Area Senior Center
38 Cottage St., PO Box 98
Littleton, NH 03561
Local Line: 444-4498
Contact person: Virginia Loring

Hillsborough County ServiceLink

Manchester
Easter Seals NH
555 Auburn Street
Manchester, NH 03103
Local Line: 644-2240
Yvonne Schulze, Director

Nashua
Community Council of Nashua
7 Prospect Street
Nashua, NH 03060-3990
Local Line: 598-4709

Merrimack County ServiceLink

2 Industrial Park Drive
PO Box 1016
Concord, NH 03302-1016
Local Line: 228-6625
Beth Benson, Director

Monadnock ServiceLink

20 Norway Avenue
Suite 302B,
Keene, NH 03431
Local Line: 357-1922
Melinda Feola Mahar, Director

Rockingham County ServiceLink

Seacoast
30 Maplewood Avenue
Suite 212
Portsmouth, NH 03801
Local Line: 334-6594
Julie Stone, Seacoast Director

Derry
The Nutfield Building
Suite 104
44 Birch Street
Derry, NH 03038
Local Line: 432-1499
Connie Young, Derry Director

Strafford County ServiceLink

1 Wakefield Street
Suite 306
Rochester, NH 03867
Local Line: 332-7398
Becky May, Director

Sullivan County ServiceLink

96 Main Street
PO Box 1338
Claremont, NH 03743
Local Line: 542-5177
Gail Merrill, Director



Guide to Services

Division of Elderly and Adult Services (DEAS)

The NH Division of Elderly and Adult Services is a state agency providing services and programs to adults aged 60 and over, and to adults between 18 and 60 years of age who have chronic illness or disability.

Acting Director:	Douglas P. McNutt
Central Office:	129 Pleasant Street, Brown Bulding Concord, New Hampshire 03301-3857
Toll Free Phone:	800-351-1888
TDDY:	800-735-2964
DHHS Internet:	www.dhhs.state.nh.us
District Offices:	For telephone numbers, see “Important New Hampshire Phone Numbers” below.

Information on DEAS Services and Programs:

Contact the District Office nearest your home (phone numbers are listed below). If you cannot reach the District Office, call **800-351-1888**.

NH ServiceLink Network: 866-634-9412

Adult Protection: To report suspected abuse, neglect, exploitation or self-neglect regarding an elderly or incapacitated adult, call the District Office nearest your home (phone numbers are listed below). If you cannot reach the District Office, call **800-351-1888, Ext. 4384**.

Alzheimer’s Program (Information, Respite Care):

Call 800-351-1888 ext. 4687.

Senior Prescription Drug Discount Program (For persons age 65 and older): Call 888-580-8902.

Long-Term Care Ombudsman: Call 800-442-5640.

Important New Hampshire Phone Numbers

DEAS District Offices			
Berlin	800-972-6111 603-752-7800	Littleton	800-552-8959 603-444-6786
Claremont	800-982-1001 603-542-9544	Manchester	800-852-7493 603-668-2330
Concord	800-322-9191 603-271-3610	Nashua	800-852-0632 603-883-7726
Conway	800-552-4628 603-447-3841	Portsmouth	800-821-0326 603-433-8318
Keene	800-624-9700 603-357-3510	Rochester	800-862-5300 603-332-9120
Laconia	800-322-2121 603-524-4485	Salem	800-852-7492 603-893-9763

Area Committees on Aging

BELKNAP COUNTY

Mary Frost
101 Old Lake Shore Road
Gilford 03249
524-2974

CARROLL COUNTY

Dorothy Solomon
Box 993
Albany 03878
447-1199

CHESHIRE COUNTY

Martha Bauman
305 Roxbury St., Keene 03431
352-8725

COOS COUNTY

Suzanne Kearns, Co-Chair
North Country Elderly Programs
31 Pleasant St., Berlin 03570
752-3010

Dona Larsen, Co-Chair
NH Legal Assistance
256 Main St., Berlin 03570
752-1100

GRAFTON COUNTY

Elaine Vieira
258 Highland St.
Plymouth 03264
536-2232

HILLSBOROUGH COUNTY

(Greater Manchester)
Dennis Hett, Co-Chair
345 Edward J Roy Drive
Manchester 03102
626-3479

Helen Zarnowski, Co-Chair
14 Swan Ave., Bedford 03110
622-8405

HILLSBOROUGH COUNTY

(Greater Nashua)
Kay Noel
49 Lund St.
Nashua 03060-4441
882-5502

MERRIMACK COUNTY

Jacqelyne Jennings, Co-Chair
10 Ordway Ln., Bow 03304
224-1710

John Hoar, Co-Chair
82 Centre St., Concord 03301
228-8340

ROCKINGHAM COUNTY

Robert Forsing
12 Green St., Raymond 03077
895-9451

STRAFFORD COUNTY

Becky May, Co-Chair
Strafford Network-ServiceLink
1 Wakefield St., Suite 212
Rochester 03867
740-9594

Darlene Smith
The Wentworth Group
795 Central Ave., Dover 03820
742-7406

SULLIVAN COUNTY

Theresa LaPointe, Co-Chair
7 Bank Ave., Claremont 03743
542-6418

Amy Patnaude, Co-Chair
4 Roseland Rd., Newport 03773
863-3070

NO. COUNTY SR. ACTION

Dona Larsen
NH Legal Assistance
256 Main St., Berlin 03570
752-1100

Community Supplemental Food Program	800-942-4321
Consumer Protection for Public Utilities	800-852-3793
Consumer Protection for Insurance	800-352-3416
Eldercare Locator	800-677-1116
Food Stamp Information	800-852-3345
Foster Grandparent Program	800-536-1193
Fuel Assistance Information	603-271-8317
Governor’s Citizens Service	800-852-3456
HICEAS (Health Insurance Counseling, Education Assistance)	800-852-3388
Legal Services Advice Line 888-353-9944 or TTY: 800-634-8989 (for Manchester residents only)	603-624-6000
Living Will Information	603-225-0900
Medicaid Information	800-852-3345
Medicare Claims Information	800-447-1142
Part A: 800-522-8323, Part B: 800-447-1142	
Quality of Care:	800-772-0151

New Hampshire Help Line	800-852-3388
NH ServiceLink Network	866-634-9412
Senior Companion Program	800-856-5525
Social Security Administration	800-772-1213
Veterans Council	800-622-9230 or 603-624-9230

State Committee on Aging

Hon. Peter Batula

12 Paige Drive
Merrimack 03054-2837
424-6091

Kenneth Brooks

49 Technology Drive,
Apt. #57
Bedford 03110
647-4240

Hon. Robert Chabot

73 Joseph St.
Manchester 03102
625-5617

Barclay Chase

40 Barker Street
Keene 03431
352-4152

Violet Constant

28 Portsmouth Street
Concord 03301
225-5443

Darwin Farber

12 Meadowood Drive
Exeter 03833
772-4341

Robert Forsing

12 Green Road
Raymond 03077
895-9451

Dr. Mendon MacDonald

(Chairman)
73 Schoolhouse Hill Road
Gilford 03246
524-2515

Margaret “Marge” McClellan

1156 West Milan Road
Milan 03588
449-2014

Dr. Joseph Miller

13 Burnham Avenue
Durham 03824
868-1689

Robert Montgomery

24 Mountain Road, 3C
Goffstown 03045
497-3992

Susan Presby

83 Elm Street
Littleton 03561
444-0335

Ellen Sheridan

9 Fiskill Farm
Concord 03301
224-7612

Dorothy Solomon

Box 993
Albany 03818
447-1199